

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000108720

Entity Name: TWISTEE TREAT MANAGER, LLC

Current Principal Place of Business:

5555 S. KIRKMAN ROAD
STE. 201
ORLANDO, FL 32819

Current Mailing Address:

5555 S. KIRKMAN ROAD
STE. 201
ORLANDO, FL 32819 US

FEI Number: 46-3683588

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HODGE, RANDALL R
5555 S. KIRKMAN ROAD
STE. 201
ORLANDO, FL 32819 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name KHATIB, RASHID A
Address 5555 S. KIRKMAN ROAD, STE. 201
City-State-Zip: ORLANDO FL 32819

Title VP
Name HODGE, RANDALL R
Address 5555 S. KIRKMAN ROAD
STE. 201
City-State-Zip: ORLANDO FL 32819

Title PRESIDENT
Name KHATIB, RASHID A
Address 5555 S. KIRKMAN ROAD
STE. 201
City-State-Zip: ORLANDO FL 32819

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RANDALL R HODGE

VP

04/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date