

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000170109

**Entity Name:** 2782 DIRECTIONAL EQUITY, LLC

**Current Principal Place of Business:**

712 SOUTH ORLEANS AVE.  
TAMPA, FL 33606

**Current Mailing Address:**

712 SOUTH ORLEANS AVE.  
TAMPA, FL 33606

**FEI Number:** 46-4285357

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CONNERY, JOHN C JR.  
101 E. KENNEDY BLVD., SUITE 3700  
TAMPA, FL 33602 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 AUTHORIZED MEMBER  
Name YODZIS, JOHN J  
Address 712 SOUTH ORLEANS AVE.  
City-State-Zip: TAMPA FL 33606

Title MANAGER  
Name YODZIS, CAROLYN D  
Address 712 SOUTH ORLEANS AVE.  
City-State-Zip: TAMPA FL 33606

Title AUTHORIZED MEMBER  
Name AUDIBERT, SARAH C  
Address 712 SOUTH ORLEANS AVE.  
City-State-Zip: TAMPA FL 33606

Title AUTHORIZED MEMBER  
Name YODZIS, JOHN P  
Address 712 SOUTH ORLEANS AVE.  
City-State-Zip: TAMPA FL 33606

*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:** JOHN J. YODZIS

**PRESIDENT &  
AUTHORIZED MEMBER**

**04/21/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date