

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000013560

Entity Name: 10794 HAWTHORN TRAIL, LLC

Current Principal Place of Business:

34 ALLAMANDA AVENUE
KEY WEST, FL 33040

Current Mailing Address:

34 ALLAMANDA AVENUE
KEY WEST, FL 33040

FEI Number: 46-4617505

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOCKWOOD, KAREN A
34 ALLAMANDA AVENUE
KEY WEST, FL 33040 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	Title	MGR
Name	LOCKWOOD, JOHN M	Name	LOCKWOOD, KAREN A
Address	34 ALLAMANDA AVENUE	Address	34 ALLAMANDA AVENUE
City-State-Zip:	KEY WEST FL 33040	City-State-Zip:	KEY WEST FL 33040
Title	MGR		
Name	BRODERSON, TARYN N		
Address	270 4TH STREET, UNIT 502		
City-State-Zip:	ST. PAUL MN 55101		

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: KAREN A LOCKWOOD

MGR

02/23/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date