

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000036625

Entity Name: THIRD ROW CENTER SINGERS, LLC**Current Principal Place of Business:**145 HEATHERWOOD DRIVE
ROYAL PALM BEACH, FL 33411**Current Mailing Address:**145 HEATHERWOOD DRIVE
ROYAL PALM BEACH, FL 33411**FEI Number:** 46-5073016**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KUNARD, JAMES J
145 HEATHERWOOD DRIVE
ROYAL PALM BEACH, FL 33411 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 AMBR
Name KUNARD, JAMES J
Address 145 HEATHERWOOD DRIVE
City-State-Zip: ROYAL PALM BEACH FL 33411

Title AMBR
Name HOLT, KARENNA A
Address 13282 24TH COURT NORTH
City-State-Zip: LOXAHATCHEE FL 33470

Title AMBR
Name DESANTI, MICHELLE
Address 201 MONTEREY WAY
City-State-Zip: ROYAL PALM BEACH FL 33411

Title AMBR
Name TARR, RONALD
Address 3315 LOWSON BLVD.
City-State-Zip: DELRAY BEACH FL 33445

Title AMBR
Name CAMERINO, ERNIE
Address 139 SANTA MONICA AVE
City-State-Zip: ROYAL PALM BEACH FL 33411

Title AMBR
Name ABALDO, CARA
Address 15551 CEDAR GROVE LANE
City-State-Zip: WELLINGTON FL 33414

Title AMBR
Name HARABIN, MICHAEL
Address 12002 POINCIANA BLVD.
UNIT 102
City-State-Zip: ROYAL PALM BEACH FL 33411

Title AMBR
Name SUHRBUR, JOSEPH
Address 7056 BURGESS DRIVE
City-State-Zip: GREENACRES FL 33467

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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: JAMES J. KUNARD**BUSINESS MANAGER****04/17/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title AMBR
Name DAWSON, TIFFANY
Address 4715 PALMBROOKE CIR
City-State-Zip: WEST PALM BEACH FL 33417

Title AMBR
Name GARBO, IRENE
Address 3941 BACK BAY DRIVE
 226
City-State-Zip: JUPITER FL 33477

Title AMBR
Name GROSSMAN, LAURIE
Address 1577 LAKE BREEZE DR.
City-State-Zip: WELLINGTON FL 33414

Title AMBR
Name DAWSON, JOANN
Address 4715 PALMBROOKE CIR
City-State-Zip: WEST PALM BEACH FL 33417

Title AMBR
Name THURMOND, ALTHENIA
Address 215 LAKE SUSAN LANE
City-State-Zip: WEST PALM BEACH FL 33411