

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000128809

**Entity Name:** OBF INVESTMENTS, LLC

**Current Principal Place of Business:**

10100 DR MARTIN LUTHER KING JR ST N  
ST PETERSBURG, FL 33716

**Current Mailing Address:**

10100 DR MARTIN LUTHER KING JR ST N  
ST PETERSBURG, FL 33716

**FEI Number:** 47-1725940

**Certificate of Status Desired:** No

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

F & L CORP  
ONE INDEPENDENT DRIVE, SUITE 1300  
JACKSONVILLE, FL 32202-5017 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 DIRECTOR  
Name SCHOLL, GEORGE  
Address 10100 DR MARTIN LUTHER KING JR  
ST N  
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR  
Name MURPHY, JOHN  
Address 10100 DR MARTIN LUTHER KING JR  
ST N  
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR  
Name BIEBERBACH, WILLIAM  
Address 10100 DR MARTIN LUTHER KING JR  
ST N  
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR  
Name WINDHAM, JOHN F  
Address 10100 DR MARTIN LUTHER KING JR  
ST N  
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR  
Name WARREN, WILLIAM L.  
Address 10100 DR MARTIN LUTHER KING JR  
ST N  
City-State-Zip: ST. PETERSBURG FL 33716

*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 MURPHY

**DIRECTOR**

**02/09/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date