

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000007680

**Entity Name:** 1600 WEST OAKLAND PARK, L.L.C.

**Current Principal Place of Business:**

1600 WEST OAKLAND PARK BOULEVARD  
FORT LAUDERDALE, FL 33311

**Current Mailing Address:**

1600 WEST OAKLAND PARK BOULEVARD  
FORT LAUDERDALE, FL 33311

**FEI Number:** 65-0964519

**Certificate of Status Desired:** No

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

FAWLEY, MICHAEL R  
2518 ARBOR DRIVE  
FT. LAUDERDALE, FL 33312 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 MGRM  
Name CHAMBERLAIN, LAWRENCE  
Address 2015 N. 28TH AVENUE  
City-State-Zip: HOLLYWOOD FL 33020

Title MGRM  
Name ZEIGLER, LINDA  
Address 2900 N.E. 15TH TERRACE  
City-State-Zip: FORT LAUDERDALE FL 33334

Title MGRM  
Name FAWLEY, MICHAEL R  
Address 2518 ARBOR DRIVE  
City-State-Zip: FORT LAUDERDALE FL 33312

Title MGRM  
Name GAI, MICHAEL  
Address 10360 GROVE LANE  
City-State-Zip: COOPER CITY FL 33328

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LINDA ZEIGLER

MGRM

02/21/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date