

**2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000006164

**Entity Name:** FCSL PROPERTIES, LLC**Current Principal Place of Business:**1100 5TH AVENUE SOUTH  
SUITE 301  
NAPLES, FL 34102**Current Mailing Address:**1100 5TH AVENUE SOUTH  
SUITE 301  
NAPLES, FL 34102**FEI Number:** 20-3734730**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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	MGRP
Name	INATOME, RICK
Address	1100 5TH AVENUE SOUTH, SUITE 301
City-State-Zip:	NAPLES FL 34102

Title	MGR
Name	DREYER, MICHELLE
Address	2711 CENTERVILLE RD., #400
City-State-Zip:	WILMINGTON DE 19808

Title	CFO
Name	CHAIT, DOUG
Address	1100 5TH AVENUE SOUTH, SUITE 301
City-State-Zip:	NAPLES FL 34102

Title	MGR
Name	STONE, DENNIS
Address	2145 SUTTLE AVE.
City-State-Zip:	CHARLOTTE NC 28208

Title	S
Name	OGENE, CHIDI
Address	1100 5TH AVENUE SOUTH, SUITE 301
City-State-Zip:	NAPLES FL 34102

Title	MGRM
Name	FCSL PROPERTIES MEMBER, LLC
Address	1100 5TH AVENUE SOUTH, SUITE 301
City-State-Zip:	NAPLES FL 34102

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:** CHIDI OGENE**SECRETARY****03/20/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date