

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000092356

**Entity Name:** THREE STORIES, LLC

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

341 PLANT AVE.  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

341 PLANT AVE.  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:** 20-3494733

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEIL S. SCHECT, P.A.  
3630 WEST KENNEDY BLVD.  
TAMPA, FL 33609 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MARSHALL, J. KEVIN  
Address: 341 PLANT AVE.  
City-St-Zip: TAMPA, FL 33606

Title: MGR  
Name: MARSHALL, JENNIFER L  
Address: 341 PLANT AVENUE  
City-St-Zip: TAMPA, FL 33606 US

I hereby certify that the information indicated on this 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.

SIGNATURE: JOHN KEVIN MARSHALL

MM

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date