

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000009117

Entity Name: DOUGLAS W. LACROSSE, LLC

Current Principal Place of Business:

3303 WEST MORRISON AVENUE
TAMPA, FL 33629

Current Mailing Address:

3303 WEST MORRISON AVENUE
TAMPA, FL 33629

FEI Number: 26-5081168

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HINES, JAMES PESQ.
315 SOUTH HYDE PARK AVENUE
TAMPA, FL 33606 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 LACROSSE, DOUG
Address 3303 W. MORRISON AVE.
City-State-Zip: TAMPA FL 33629

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: DOUGLAS LACROSSE

MANAGING PARTNER

03/12/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date