

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000014621

**Entity Name:** URBAN DEVELOPMENT OF PASCO COUNTY L.L.C.

**Current Principal Place of Business:**

2155 GLEN DR.  
SAFETY HARBOR, FL 34695-2013

**Current Mailing Address:**

P. O. BOX 2130, STATION "B"  
RICHMOND HILL, ONTARIO L4E 1A3 CA

**FEI Number: 59-3703753**

**Certificate of Status Desired: Yes**

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

ORSI, ANGELA  
2155 GLEN DR.  
SAFETY HARBOR, FL 34695-2013 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 ORSI, ANGELA  
Address P. O. BOX 2130, STATION 'B'  
City-State-Zip: RICHMOND HILL ONTARIO L4E 1A3

Title MGRM  
Name ORSI, ANTONIO  
Address P. O. BOX 2130, STATION 'B'  
City-State-Zip: RICHMOND HILL ONTARIO L4E 1A3

Title MGRM  
Name ORSI, PAUL  
Address P. O. BOX 2130, STATION 'B'  
City-State-Zip: RICHMOND HILL ONTARIO L4E 1A3

*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: ANGELA ORSI**

**MANAGER**

**01/23/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date