

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000064288

**Entity Name:** CSA CLEARWATER, P.L.

**Current Principal Place of Business:**

6006 49TH STREET NORTH, SUITE 310  
ST. PETERSBURG, FL 33709

**Current Mailing Address:**

6006 49TH STREET NORTH, SUITE 310  
ST. PETERSBURG, FL 33709

**FEI Number:** 20-5132743

**Certificate of Status Desired:** No

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

HERIC, BLAINE RMD  
6006 49TH STREET NORTH, SUITE 310  
ST. PETERSBURG, FL 33709 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	MGR	Title	MGRM
Name	OFENLOCH, JOHN CMD	Name	HERIC, BLAINE RMD
Address	6006 49TH ST N STE 310	Address	6006 49TH ST N STE 310
City-State-Zip:	SAINT PETERSBURG FL 33709	City-State-Zip:	SAINT PETERSBURG FL 33709

*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:** JOHN C OFENLOCH

MGR

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date