

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000035212

**Entity Name:** MAGNOLIA PARK-GAINESVILLE, LLC

**Current Principal Place of Business:**

NORTH US 441  
GAINESVILLE, FL 32653

**Current Mailing Address:**

C/O DAWN G PETRELLA  
10216 SW 41 AVE  
GAINESVILLE, FL 32608 US

**FEI Number:** 20-8827160

**Certificate of Status Desired:** No

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

SCHANZE, THOMAS N  
C/O DAWN G PETRELLA  
10216 SW 41 AVE  
GAINESVILLE, FL 32608 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           MANAGER  
Name            SCHANZE, THOMAS  
Address         PO BOX 928  
City-State-Zip: MELROSE FL 32666

Title            TREASURER  
Name            PETRELLA, DAWN G  
Address         10216 SW 41 AVE  
City-State-Zip: GAINESVILLE FL 32608

Title            AUTHORIZED MEMBER  
Name            SWANN, STEVE  
Address         332 THIRD STREET  
City-State-Zip: JACKSONVILLE FL 32233

Title            AUTHORIZED MEMBER  
Name            THUR DE KOOS, PAUL  
Address         35 NW 48 BLVD  
City-State-Zip: GAINESVILLE FL 32607

*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:** DAWN G PETRELLA

**TREASURER**

**01/03/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date