

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000081397

**Entity Name:** 13817 PERDIDO KEY DRIVE UNIT 704, L.L.C.

**Current Principal Place of Business:**

13817 PERDIDO KEY DRIVE  
704  
PENSACOLA, FL 32507

**Current Mailing Address:**

13564 PERDIDO KEY DR.  
PENSACOLA, FL 32507

**FEI Number:** 26-3726401

**Certificate of Status Desired:** No

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

PAS, MIKE  
13564 PERDIDO KEY DRIVE  
PENSACOLA, FL 32507 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 TERN KEY REALTY AND RENTALS,  
L.L.C.  
Address 4709 BLUEBONNET BLVD. SUITE A  
City-State-Zip: BATON ROUGE LA 70809

Title MGR  
Name PAS, MIKE  
Address 13564 PERDIDO KEY DR.  
City-State-Zip: PENSACOLA FL 32507

Title MGR  
Name KEARNS, MARTIN J  
Address 4709 BLUEBONNET BLVD SUITE A  
City-State-Zip: BATON ROUGE LA 70809

*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:** MICHAEL A PAS

MGR

04/04/2017

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

\_\_\_\_\_  
Date