

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000015791

Entity Name: TWIN PALM OF MARION COUNTY, LLC

Current Principal Place of Business:

2640 SW 32ND PLACE
OCALA, FL 34471

Current Mailing Address:

2640 SW 32ND PLACE
OCALA, FL 34471

FEI Number: 26-4285806

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EPISCOPO, ANN
2640 SW 32ND PLACE
OCALA, FL 34471 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 GUPTA, NIRAV
Address 321 S.E. 29TH PLACE, STE. 101
City-State-Zip: OCALA FL 34471

Title MGRM
Name FARR, DEREK
Address 321 S.E. 29TH PLACE, STE. 101
City-State-Zip: OCALA FL 34471

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: DEREK FARR

OWNER

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date