

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000079343

Entity Name: 12960 ALEXANDRIA DRIVE, LLC

Current Principal Place of Business:

12970 POST SAID ROAD
OPA LOCKA, FL 33054

Current Mailing Address:

12970 PORT SAID ROAD
OPA LOCKA, FL 33054

FEI Number: 27-1325709

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GAITHER, TIMOTHY E
12970 POST SAID ROAD
OPA LOCKA, FL 33054 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 MM
Name JACKSON, BARBARA
Address 12970 PORT SAID ROAD
City-State-Zip: OPA LOCKA FL 33054

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BARBARA JACKSON

MANAGER

04/12/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date