

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000026214

**Entity Name:** GATORLAND BUBBLES, LLC

**Current Principal Place of Business:**

2430 NORTH MAIN STREET  
GAINESVILLE, FL 32609

**Current Mailing Address:**

10435 S.W. 45TH COURT  
OCALA, FL 34476

**FEI Number: 27-2085974**

**Certificate of Status Desired: No**

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

O'CONNOR, PATRICK MESQ.  
C/O O'CONNOR & ASSOCIATES  
1250 S. BELCHER ROAD, SUITE 160  
LARGO, FL 33771 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  
Name MENDEZ, STEVEN J  
Address 10435 S.W. 45TH COURT  
City-State-Zip: Ocala FL 34476

*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: STEVEN MENDEZ** \_\_\_\_\_

**MANAGER**

**01/22/2014**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date