

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000043589

**Entity Name:** FIRST PRASAD, LLC

**Current Principal Place of Business:**

99 NESBIT ST.  
PUNTA GORDA, FL 33950

**Current Mailing Address:**

% DAVID A. HOLMES ESQ.  
99 NESBIT STREET  
PUNTA GORDA, FL 33950

**FEI Number:** 27-2484919

**Certificate of Status Desired:** No

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

HOLMES, DAVID AESQ  
FARR LAW FIRM  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 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 EHRLICH, DAVID  
Address 99 WITHERSPOON ST, SUITE 1200  
City-State-Zip: PRINCETON NJ 08542

Title MANAGER  
Name EHRLICH, SARAH  
Address 66 WITHERSPOON ST, SUITE 1200  
City-State-Zip: PRINCETON NJ 08542

*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:** DAVID EHRLICH

MANAGER

04/24/2015

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

\_\_\_\_\_ Date