

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000076131

Entity Name: SEASON 9 LLC

Current Principal Place of Business:

2734 TERRACE DR. NORTH
CLEARWATER, FL 33759

Current Mailing Address:

2734 TERRACE DR. NORTH
CLEARWATER, FL 33759 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEINER, MARSHALL C
2734 TERRACE DRIVE N
CLEARWATER, FL 33759 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 NEINER, MARSHALL C
Address 2734 TERRACE DR. NORTH
City-State-Zip: CLEARWATER FL 33759

Title MGRM
Name NEINER, CAROL S
Address 2734 TERRACE DR. NORTH
City-State-Zip: CLEARWATER FL 33759

Title MGRM
Name NEINER, LACY
Address 2734 TERRACE DR. NORTH
City-State-Zip: CLEARWATER FL 33759

Title MGRM
Name NEINER, SARAH
Address 2734 TERRACE DR. NORTH
City-State-Zip: CLEARWATER FL 33759

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: MARSHALL C. NEINER

MGRM

04/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date