

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000103649

**Entity Name:** 535 CROCKETT, LLC

**Current Principal Place of Business:**

52 RILEY ROAD #381  
CELEBRATION, FL 34747

**Current Mailing Address:**

P O BOX 11037  
MURFREESBORO, TN 37129

**FEI Number:** 27-3608245

**Certificate of Status Desired:** No

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

JOHN H. RAINS III, P.A.  
501 EAST KENNEDY BOULEVARD  
SUITE 750  
TAMPA, FL 33602 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 TWO GRANDS, LLC  
Address P O BOX 11037  
City-State-Zip: MURFREESBORO TN 37129

*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:** TWO GRANDS, LLC

MGR

02/27/2014

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

\_\_\_\_\_  
Date