

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000131227

Entity Name: TBWC 9100, P.L.

Current Principal Place of Business:

5830 WEST CYPRESS STREET, SUITE A
TAMPA, FL 33607

Current Mailing Address:

P.O. BOX 25317
TAMPA, FL 33622

FEI Number: 27-4481137

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MADLE, ALISTAIR
5830 WEST CYPRESS STREET
SUITE A
TAMPA, FL 33607 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 DR.
Name JONES, MARNIQUE M.D.
Address 5830A WEST CYPRESS STREET
City-State-Zip: TAMPA FL 33607

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: MARNIQUE JONES, MD

MANAGING PARTNER

03/19/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date