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.

MGR

SIGNATURE: THOMAS L. WALKER

Electronic Signature of Signing Authorized Person(s) Detail

4143 GREENFERN DRIVE ORLANDO, FL 32810 US

Current Principal Place of Business:

FEI Number: 45-5112709

Current Mailing Address:

DOCUMENT# L12000036690

4143 GREENFERN DRIVE ORLANDO, FL 32810

Name and Address of Current Registered Agent:

WALKER, THOMAS L 4143 GREENFERN DRIVE ORLANDO, FL 32810 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:	: THOMAS L. WALKER			03/21/2016
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	WALKER, THOMAS L	Name	WALKER, PATRICIA D	
Address	4143 GREENFERN DRIVE	Address	4143 GREENFERN DRIVE	
City-State-Zip:	ORLANDO FL 32810	City-State-Zip:	ORLANDO FL 32810	

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT
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Entity Name: 5201 SOUTH ATLANTIC AVENUE, LLC

Certificate of Status Desired: No

03/21/2016 Date

FILED Mar 21, 2016 Secretary of State CC7845456822