

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000094894

**Entity Name:** 2169 TCW LLC

**Current Principal Place of Business:**

750 ELEVENTH STREET SOUTH  
SUITE 202  
NAPLES, FL 34102

**Current Mailing Address:**

750 ELEVENTH STREET SOUTH  
SUITE 202  
NAPLES, FL 34102 US

**FEI Number:** 46-0749555

**Certificate of Status Desired:** No

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

CRAIG D. BLUME, P.A.  
750 ELEVENTH STREET SOUTH  
SUITE 202  
NAPLES, FL 34102 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 PLC MANAGEMENT LLC  
Address 750 ELEVENTH STREET SOUTH  
SUITE 202  
City-State-Zip: NAPLES FL 34102

*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:** PETER TAKOS

MGR

04/22/2016

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

\_\_\_\_\_  
Date