

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000158460

**Entity Name:** 7427 CASS CIRCLE, LLC

**Current Principal Place of Business:**

ONE SOUTH SCHOOL AVENUE SUITE 500  
SARASOTA, FL 34237

**Current Mailing Address:**

ONE SOUTH SCHOOL AVENUE SUITE 500  
SARASOTA, FL 34237

**FEI Number:** 46-1642713

**Certificate of Status Desired:** No

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

GATES, CHAD  
ONE SOUTH SCHOOL AVENUE SUITE 500  
SARASOTA, FL 34237 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 GOES, MICHAEL  
Address 5219 SIESTA COVE DRIVE  
City-State-Zip: SARASOTA FL 34242

*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:** MICHAEL GOES

MGR

04/28/2014

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

\_\_\_\_\_ Date