

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000038666

Entity Name: 9525PH4 LLC

Current Principal Place of Business:

9525 BLIND PASS RD
PH4
ST PETE BEACH, FL 33706

Current Mailing Address:

PO BOX 17922
TAMPA, FL 33682

FEI Number: 46-2496201

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUPFERMAN, KEN
13908 N FLORIDA AVE
TAMPA, FL 33682 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: KEN KUPFERMAN

04/27/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRS
Name KUPFERMAN, LYNDA G
Address 13908 NORTH FLORIDA AVENUE
City-State-Zip: TAMPA FL 33613

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: LYNDA KUPFERMAN

MGR

04/27/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date