

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000067564

**Entity Name:** TOP SOURCE DIST LLC

**Current Principal Place of Business:**

9858 CLINT MOORE RD  
C-111  
BOCA RATON, FL 33496

**Current Mailing Address:**

9858 CLINT MOORE RD  
C-111  
BOCA RATON, FL 33496

**FEI Number:** 46-2736787

**Certificate of Status Desired:** No

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

SILBERZWEIG, LORI  
9858 CLINT MOORE RD  
C-111  
BOCA RATON, FL 33496 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 SILBERZWEIG, LORI  
Address 9858 CLINT MOORE RD SUITE C-111  
City-State-Zip: BOCA RATON FL 33496

Title MGR  
Name MANIS, MICHAEL  
Address 9858 CLINT MOORE RD SUITE C-111  
City-State-Zip: BOCA RATON FL 33496

*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:** LORI SILBERZWEIG

**MEMBER**

**01/21/2015**

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

\_\_\_\_\_  
Date