

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000080620

**Entity Name:** 719 DOUGLAS, LLC

**Current Principal Place of Business:**

1841 NORTH KEENE RD.  
CLEARWATER, FL 33755

**Current Mailing Address:**

1841 NORTH KEENE RD.  
CLEARWATER, FL 33755 US

**FEI Number:** 46-2997916

**Certificate of Status Desired:** No

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

CHIARAMONTE, ROSEANNE  
1841 NORTH KEENE RD.  
CLEARWATER, FL 33755 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 MGRM  
Name CHIARAMONTE, ROSEANNE  
Address 1841 NORTH KEENE RD  
City-State-Zip: CLEARWATER FL 33755

*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:** ROSEANNE CHIARAMONTE

MGRM

04/18/2014

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

\_\_\_\_\_ Date