

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000150957

**Entity Name:** 1445 NEW HAVEN, LLC

**Current Principal Place of Business:**

2601 N. INDIAN RIVER DR.,  
UNIT 1  
FT. PIERCE, FL 34946

**Current Mailing Address:**

2601 N. INDIAN RIVER DR.,  
UNIT 1  
FT. PIERCE, FL 34946

**FEI Number:** 46-4002060

**Certificate of Status Desired:** No

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

TEPLITZ, MARC S  
73 SW FLAGLER AVE  
STUART, FL 34994 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 BORNINO, BRUNO  
Address 2601 N. INDIAN RIVER DR., UNIT 1,  
City-State-Zip: FT. PIERCE FL 34946

*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:** BRUNO BORNINO

MANAGER

03/18/2014

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

\_\_\_\_\_  
Date