

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000169117

Entity Name: T.D.L. #1, LLC

Current Principal Place of Business:

227 MAISON CT
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

227 MAISON CT
ALTAMONTE SPRINGS, FL 32714

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LICHTER, TIMOTHY L
227 MAISON CT
ALTAMONTE SPRINGS, FL 32714 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 PRESIDENT
Name LIGHTNER, TIM L
Address 227 MAISON CT
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title PRESIDENT
Name LIGHTNER, TIM L
Address 227 MAISON CT
City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: TIM LIGHTNER

PRES

02/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date