

**2016 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:**

LIGHTNER, 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:** TIMOTHY LIGHTNER

03/29/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

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

VP

03/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date