

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000175080

**Entity Name:** TOWN CENTER OF BRANDON LLC

**Current Principal Place of Business:**

5214 W TYSON AVENUE  
TAMPA, FL 33611

**Current Mailing Address:**

P O BOX 13109  
TAMPA, FL 33681 US

**FEI Number: 46-4319390**

**Certificate of Status Desired: No**

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

LAURA A. OLSON P.A.  
200 N PIERCE ST  
4TH FL  
TAMPA, FL 33602 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 CALDERONI, RICHARD A  
Address P O BOX 13109  
City-State-Zip: TAMPA FL 33681

Title MGRM  
Name FOSCO, ALAN  
Address P O BOX 13109  
City-State-Zip: TAMPA FL 33681

Title MGRM  
Name ELKINS, KARYN  
Address P O BOX 22112  
City-State-Zip: TAMPA FL 33622

*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: RICHARD A CALDERONI**

**MANAGING MEMBER**

**03/08/2016**

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

\_\_\_\_\_  
Date