

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000033877

**Entity Name:** 2395 HARBOR ROAD, LLC

**Current Principal Place of Business:**

3435 TENTH ST. N.  
SUITE 303  
NAPLES, FL 34103

**Current Mailing Address:**

3435 TENTH ST. N.  
SUITE 303  
NAPLES, FL 34103 US

**FEI Number:** 26-5472793

**Certificate of Status Desired:** No

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

SIESKY, JAMES H  
3435 TENTH ST. N.  
SUITE 303  
NAPLES, FL 34103 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 AR  
Name SIESKY, JAMES H  
Address 3435 TENTH ST. N., SUITE 303  
City-State-Zip: NAPLES FL 34103

Title MGR  
Name HUBSCHMAN, ADAM  
Address 1097 FRANK WHITEMAN BLVD.  
City-State-Zip: NAPLES FL 34103

Title MGR, AUTHORIZED REPRESENTATIVE  
Name HUBSCHMAN, CONNIANNE  
Address 3478 MALAGA WAY  
City-State-Zip: NAPLES FL 34105

Title AUTHORIZED REPRESENTATIVE, MANAGER  
Name HUBSCHMAN, SIDNEY JOHN  
Address 3435 TENTH ST. N. SUITE 303  
City-State-Zip: NAPLES FL 34103

*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:** SIDNEY HUBSCHMAN

**MANAGER**

**01/11/2016**

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

\_\_\_\_\_  
Date