

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000074083

**Entity Name:** 2935 SW 1ST PL, LLC

**Current Principal Place of Business:**

5614 MERLYN LN  
CAPE CORAL, FL 33914

**Current Mailing Address:**

5614 MERLYN LN  
CAPE CORAL, FL 33914

**FEI Number:** 45-3641851

**Certificate of Status Desired:** No

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

SUPPLE, DEBRA  
5614 MERLYN LN  
CAPE CORAL, FL 33914 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 SUPPLE, DEBRA  
Address 5614 MERLYN LN  
City-State-Zip: CAPE CORAL FL 33914

*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:** DEBRA SUPPLE

MGR

03/02/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date