

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000081535

**Entity Name:** ANCIENT OCEAN, LLC

**Current Principal Place of Business:**

329 NEAPOLITAN WAY  
NAPLES, FL 34103

**Current Mailing Address:**

329 NEAPOLITAN WAY  
NAPLES, FL 34103 US

**FEI Number:** 47-0993081

**Certificate of Status Desired:** No

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

WOODS, WEIDENMILLER, MICHETTI & RUDNICK PL  
9045 STRADA STELL COURT  
SUITE 400  
NAPLES, FL 34109 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	AMBR	Title	AMBR
Name	MALECKAR, TOD G	Name	MALECKAR, DIANA J
Address	329 NEAPOLITAN WAY	Address	329 NEAPOLITAN WAY
City-State-Zip:	NAPLES FL 34103	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:** DIANA MALECKAR

AMBR

04/13/2015

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

\_\_\_\_\_ Date