

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000115911

**Entity Name:** AIRPORT PLAZA U-LOCK-IT, LLC

**Current Principal Place of Business:**

989 NORTH SUNCOAST BLVD.  
CRYSTAL RIVER, FL 34429

**Current Mailing Address:**

989 NORTH SUNCOAST BLVD.  
CRYSTAL RIVER, FL 34429

**FEI Number:** 47-1528717

**Certificate of Status Desired:** No

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

GREEN, JAMES D  
9030 WEST FORT ISLAND TRAIL  
SUITE 5  
CRYSTAL RIVER, FL 34429 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 SMITH, TALMADGE W  
Address 3945 WEST IVY STREET  
City-State-Zip: DUNNELLON FL 34433

Title MGR  
Name SMITH, THERA J  
Address 3945 WEST IVY STREET  
City-State-Zip: DUNNELLON FL 34433

Title MGR  
Name SMITH, WAYNE M  
Address 3945 WEST IVY STREET  
City-State-Zip: DUNNELLON FL 34433

*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:** TALMADGE W. SMITH

**MANAGER**

**03/06/2015**

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

\_\_\_\_\_  
Date