

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000158507

**Entity Name:** 4410 OUTER DRIVE DUPLEX, LLC

**Current Principal Place of Business:**

15275 COLLIER BLVD #201/326  
NAPLES, FL 34119

**Current Mailing Address:**

15275 COLLIER BLVD #201/326  
NAPLES, FL 34119

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HL STATUTORY AGENT, INC  
5811 PELICAN BAY BOULEVARD  
SUITE 650  
NAPLES, FL 34108 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	Title	MGR
Name	MULHOLLAND, TODD	Name	MULHOLLAND, LICET
Address	15275 COLLIER BLVD #201/326	Address	15275 COLLIER BLVD #201/326
City-State-Zip:	NAPLES FL 34119	City-State-Zip:	NAPLES FL 34119

*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:** TODD MULHOLLAND

**MANAGER**

**04/28/2016**

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

\_\_\_\_\_  
Date