

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000112488

**Entity Name:** SUGARLOAF COMMERCE CENTER LLC

**Current Principal Place of Business:**

23421 WALDEN CENTER DRIVE SUITE #300  
ESTERO, FL 34134

**Current Mailing Address:**

23421 WALDEN CENTER DRIVE SUITE #300  
ESTERO, FL 34134 US

**FEI Number:** 81-2915881

**Certificate of Status Desired:** No

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

DENTI, KEVIN A ESQ.  
2180 IMMOKALEE ROAD-SUITE #316  
NAPLES, FL 34110 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 HAGENBUCKLE, WALTER S  
Address 23421 WALDEN CENTER DRIVE SUITE  
#300  
City-State-Zip: ESTERO FL 34134

Title MANAGER  
Name GRAY, ROBERT M  
Address 23421 WALDEN CENTER DRIVE SUITE  
#300  
City-State-Zip: ESTERO FL 34134

*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:** WALTER S. HAGENBUCKLE

MGR

03/21/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date