## **2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000004107

Entity Name: TALLAHASSEE LEASED HOUSING ASSOCIATES I, LLC

FILED
Jan 23, 2013
Secretary of State
CC1743992376

**Current Principal Place of Business:** 

2905 NORTHWEST BLVD STE 150 PLYMOUTH. MN 55441

## **Current Mailing Address:**

2905 NORTHWEST BLVD STE 150 PLYMOUTH. MN 55441

FEI Number: 45-2956158 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 BRIERTON, DAVID L Name SAFAR, JACK W

Address 2905 NORTHWEST BLVD STE 150 Address 2905 NORTHWEST BLVD STE 150

City-State-Zip: PLYMOUTH MN 55441 City-State-Zip: PLYMOUTH MN 55441

Title MGR Title MGR

Name BRACHMAN, ARMAND E Name SWEEN, PAUL R

Address 2905 NORTHWEST BLVD STE 150 Address 2905 NORTHWEST BLVD STE 150

City-State-Zip: PLYMOUTH MN 55441 City-State-Zip: PLYMOUTH MN 55441

Title MGR Title MGR

Name HUGGERT, JEFFREY R Name MOORHOUSE, MARK S

Address 2905 NORTHWEST BLVD STE 150 Address 2905 NORTHWEST BLVD STE 150

City-State-Zip: PLYMOUTH MN 55441 City-State-Zip: PLYMOUTH MN 55441

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ARMAND BRACHMAN

**MEMBER** 

01/23/2013