

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000032445

**Entity Name:** FFT LIVINGSTONE INVESTORS, INC.

**Current Principal Place of Business:**

1511 RIDGESIDE DRIVE  
C  
MOUNT AIRY, MD 21771

**Current Mailing Address:**

1511 RIDGESIDE DRIVE  
C  
MOUNT AIRY, MD 21771

**FEI Number:** 52-2130019

**Certificate of Status Desired:** Yes

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

YOVANOVICH, RICHARD ESQ  
GOODLETTE, COLEMAN, JOHNSON, P.A  
NORTHERN TRUST BK BLDG, 4001 TAMiami TR N  
NAPLES, FL 34103 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

**Officer/Director Detail :**

Title DIRECTOR  
Name THE CHARLES S. FALLER JR TRUST  
Address 1511 RIDGESIDE DRIVE  
C  
City-State-Zip: MOUNT AIRY MD 21771

Title VP  
Name FALLER, SAMUEL J  
Address 1511 RIDGESIDE DRIVE, SUITE C  
City-State-Zip: MOUNT AIRY MD 21771

Title EXECUTIVE VICE PRESIDENT  
Name LAVO, JAMES J  
Address 1511 RIDGESIDE DRIVE  
C  
City-State-Zip: MOUNT AIRY MD 21771

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAMES LAVO

**EXECUTIVE VP**

**01/12/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date