

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008495

Entity Name: 5900 AUSTRALIAN AVENUE, LLC

Current Principal Place of Business:

5409 AUSTRALIAN AVENUE
WEST PALM BEACH, FL 33407

Current Mailing Address:

5409 AUSTRALIAN AVENUE
WEST PALM BEACH, FL 33407 US

FEI Number: 65-1105945

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONCHICK, MICHAEL J
C/O CASEY, CIKLIN
515 NORTH FLAGLER DRIVE 20TH FLOOR
WEST PALM BEACH, FL 33418 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 MGRM
Name GLENN B. HARKINS, JR. REVOCABLE TRUST
Address 114 FOREST HILL BLVD
City-State-Zip: WEST PALM BEACH FL 33405

Title MGRM
Name 5409 AUSTRALIAN AVENUE, LLC
Address 5409 AUSTRALIAN AVE
City-State-Zip: WEST PALM BEACH FL 33407

Title MGRM
Name SPENCER, JERRY L
Address 2626 ELECTRONICS WAY
City-State-Zip: WEST PALM BEACH FL 33407

Title MGRM
Name MONCHICK, MICHAEL J
Address C/O CASEY, CIKLIN
515 NORTH FLAGLER DRIVE 20TH FLOOR
City-State-Zip: WEST PALM BEACH FL 44401

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: CHARLES GERLACH

MEMBER

01/28/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date