## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0100008495

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

## 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 FILED Feb 05, 2013 Secretary of State CC1279272740

Certificate of Status Desired: No

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

### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	GLENN B. HARKINS, JR. REVOCABLE	Name	5409 AUSTRALIAN AVENUE, LLC
Address	TRUST 114 FOREST HILL BLVD	Address	5409 AUSTRALIAN AVE
Address	114 FOREST HILL BLVD	Citv-State-Zip:	WEST PALM BEACH FL 33407
City-State-Zip:	WEST PALM BEACH FL 33405	,	
Tide	MODM	Title	MGRM
Title	MGRM	Name	MONCHICK, MICHAEL J
Name	SPENCER, JERRY L	Address	C/O CASEY, CIKLIN 515 NORTH FLAGLER DRIVE 20TH FLOOR
Address	2626 ELECTRONICS WAY		
Citv-State-Zip:	WEST PALM BEACH FL 33407		
		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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: CHARLES GERLACH FOR 5409 AUSTRALIAN AVENUE, LLC

MGRM

02/05/2013

Date

Electronic Signature of Signing Authorized Person(s) Detail