

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000016147

**FILED**  
**Feb 11, 2019**  
**Secretary of State**  
**5174424035CC**

**Entity Name:** 1972 PERFECT SEASON TEAM 17-0 ENTERPRISES, LLC

**Current Principal Place of Business:**

2850 N. ANDREWS AVE.  
FORT LAUDERDALE, FL 33311

**Current Mailing Address:**

2850 N. ANDREWS AVE.  
FORT LAUDERDALE, FL 33311 US

**FEI Number:** 46-0495990

**Certificate of Status Desired:** No

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

MATTHEW E. MORRALL, P.A.  
2850 N. ANDREWS AVE.  
FORT LAUDERDALE, FL 33311 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 ANDERSON, RICHARD P  
Address 7751 SW 62 AVENUE STE 200  
City-State-Zip: MIAMI FL 33143

Title MGR  
Name MORRALL, MATTHEW E  
Address 2850 N. ANDREWS AVE  
City-State-Zip: FORT LAUDERDALE FL 33311

Title MGR  
Name FLEMING, MARVIN  
Address 909 HOWARD STREET  
City-State-Zip: MARINA DEL REY CA 90292

*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:** RICHARD P. ANDERSON

MGR

02/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date