

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016266

Entity Name: SWALLOW APTS., LLC.

Current Principal Place of Business:

C/O MRS. CAROL KIMMONS
7551 NW 72 AVENUE
MEDLEY, FL 33166

Current Mailing Address:

C/O MRS. CAROL KIMMONS
7551 NW 72 AVENUE
MEDLEY, FL 33166

FEI Number: 61-1420784

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIMMONS, CAROL
7551 N.W. 72 AVENUE
MIAMI, FL 33166 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 PROPERTY SUPPORT SERVICES LLC
Address 7551 N.W. 72 AVENUE
City-State-Zip: MIAMI FL 33166

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: CAROL KIMMONS

MGR

02/02/2017

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date