

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000021791

**Entity Name:** COMO PROPERTIES, LLC**Current Principal Place of Business:**2925 PGA BLVD  
SUITE 200  
PALM BEACH GARDENS, FL 33410**Current Mailing Address:**2401 PGA BLVD  
SUITE 150  
PALM BEACH GARDENS, FL 33410**FEI Number:** 43-1971573**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARMOUR, ALAN III  
1645 PALM BEACH LAKES BLVD.  
SUITE 1200  
WEST PALM BEACH, FL 33401 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	RICCI, EDWARD M
Address	19670 LOXAHATCHEE RIVER RD
City-State-Zip:	JUPITER FL 33458
Title	MGRM
Name	LEOPOLD, THEODORE J
Address	85 SANDBOURNE LANE
City-State-Zip:	PALM BEACH GARDENS FL 33418
Title	MGRM
Name	HASS, BRIAN
Address	2165 RADNOR RD
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	MGRM
Name	RICCI, MARY E
Address	19670 LOXAHATCHEE RIVER
City-State-Zip:	JUPITER FL 33458
Title	MGRM
Name	LEOPOLD, ROSLYN
Address	85 SANDBOURNE LANE
City-State-Zip:	PALM BEACH GARDENS FL 33418
Title	MGRM
Name	HASS, ANDREA
Address	2165 RADNOR RD
City-State-Zip:	NORTH PALM BEACH FL 33408

*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:** BRIAN HASS**OWNER****01/08/2015**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date