

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000025598

**Entity Name:** RESIDENTIAL PROPERTIES OF WESTON LLC

**Current Principal Place of Business:**

19385 WATERS EDGE ST  
WESTON, FL 33332

**Current Mailing Address:**

P O BOX 19119  
PLANTATION, FL 33317 US

**FEI Number: 51-0520676**

**Certificate of Status Desired: Yes**

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

CARCAISE, VICKIE  
8100 SW TENTH ST  
STE 4000  
PLANTATION, FL 33324 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	SECR	Title	MGR
Name	CRAWFORD, LINDA T	Name	CAPORELLA, JOSEPH G
Address	8100 SW TENTH STREET	Address	P O BOX 19119
City-State-Zip:	FORT LAUDERDALE FL 33324	City-State-Zip:	PLANTATION FL 33317

*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: LINDA T CRAWFORD**

**SECRETARY**

**01/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date