

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013128

Entity Name: SOUTHWEST PALM BAY ONE, LLC**Current Principal Place of Business:**626 OLD DIXIE HIGHWAY SW
VERO BEACH, FL 32962**Current Mailing Address:**626 OLD DIXIE HIGHWAY SW
VERO BEACH, FL 32962 US**FEI Number:** 59-2031085**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRYN, MARK JESQUIRE
C/O BRYN & ASSOCIATES, P.A.
2 SOUTH BISCAYNE BLVD., SUITE 2680
MIAMI, FL 33131 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 | FROMBERG, DOREE |
| Address | 2 GROVE ISLE DRIVE, PH 1, BLDG. 2 |
| City-State-Zip: | COCONUT GROVE FL 33133 |

| | |
|-----------------|--------------------------|
| Title | MANAGER |
| Name | VON STEIN, KIRK L |
| Address | 626 OLD DIXIE HIGHWAY SW |
| City-State-Zip: | VERO BEACH FL 32962 |

| | |
|-----------------|-----------------------|
| Title | MEMBER/MANAGER |
| Name | NACRON, ROBERT M |
| Address | 10521 SW 123RD STREET |
| City-State-Zip: | MIAMI FL 33176 |

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: KIRK VON STEIN

MANAGER

03/13/2019

Electronic Signature of Signing Authorized Person(s) Detail_____
Date