

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085750

Entity Name: BROWARD GP, LLC**Current Principal Place of Business:**C/O FRAN SHAPIRO
3861 NORTH 31 TERRACE
HOLLYWOOD, FL 33021**Current Mailing Address:**CHERRY BEKAERT LLP
2525 PONCE DE LEON BLVD SUITE 1040
CORAL GABLES, FL 33134 US**FEI Number:** 20-1971998**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHAPIRO, FRANCES
CHERRY BEKAERT LLP
2525 PONCE DE LEON BLVD SUITE 1040
CORAL GABLES, FL 33134 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:** FRANCES SHAPIRO

01/11/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title VP, DIRECTOR
Name BEDZOW, MICHAEL
Address CHERRY BEKAERT LLP
2525 PONCE DE LEON BLVD SUITE
1040
City-State-Zip: CORAL GABLES FL 33134

Title VP, DIRECTOR
Name FEINGOLD, ESTHER
Address CHERRY BEKAERT LLP
2525 PONCE DE LEON BLVD SUITE
1040
City-State-Zip: CORAL GABLES FL 33134

Title CHAIRMAN, DIRECTOR
Name BEDZOW, CHARLES
Address CHERRY BEKAERT LLP
2525 PONCE DE LEON BLVD SUITE
1040
City-State-Zip: CORAL GABLES FL 33134

Title PRESIDENT, TREASURER,
DIRECTOR, MANAGER
Name SHAPIRO, FRANCES
Address CHERRY BEKAERT LLP
2525 PONCE DE LEON BLVD SUITE
1040
City-State-Zip: CORAL GABLES FL 33134

Title VP, SECRETARY, DIRECTOR
Name BEDZOW, SARA
Address CHERRY BEKAERT LLP
2525 PONCE DE LEON BLVD SUITE
1040
City-State-Zip: CORAL GABLES FL 33134

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: FRANCES SHAPIRO

PRESIDENT

01/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date