

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000065733

**FILED**  
**Apr 25, 2017**  
**Secretary of State**  
**CC0619753409**

**Entity Name:** 728 THE RESERVE, LLC

**Current Principal Place of Business:**

4240 POINT LA VISTA ROAD WEST  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

4240 POINT LA VISTA ROAD WEST  
JACKSONVILLE, FL 32207

**FEI Number:** 20-3100770

**Certificate of Status Desired:** No

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

MAHAJAN, SUNEEL LM.D.  
4240 POINT LA VISTA ROAD WEST  
JACKSONVILLE, FL 32207 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 MAHAJAN, SUNEEL L  
Address 4240 POINT LA VISTA ROAD WEST  
City-State-Zip: JACKSONVILLE FL 32207

Title MGRM  
Name PATHAK, ANIL M  
Address 8405 PAPELON WAY  
City-State-Zip: JACKSONVILLE FL 32217

Title MGRM  
Name SHAH, NANDU K  
Address 12209 COTTAIL LANE  
City-State-Zip: JACKSONVILLE FL 32223

*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:** SUNEEL MAHAJAN

**MANAGER**

**04/25/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date