# **2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT** DOCUMENT# L05000072270

Entity Name: SEMINOLE APARTMENTS, LLC

### **Current Principal Place of Business:**

INNOVEST CAPITAL 176 FEDERAL ST SUITE 403 BOSTON, MA 02110

#### **Current Mailing Address:**

INNOVEST CAPITAL 176 FEDERAL ST SUITE 403 BOSTON, MA 02110 US

## FEI Number: 20-3194929

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

INNOVEST CAPITAL 225 W. SEMINOLE BLVD. 105 SANFORD, FL 32771 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	MARK NALOR, MANAGER			06/01/2015
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	AUTHORIZED SIGNER	
Name	INNOVEST CAPITAL, INC.	Name	HARELICK, DAVID B	
Address	INNOVEST CAPITAL 176 FEDERAL ST SUITE 403	Address	INNOVEST CAPITAL 176 FEDERAL ST SUITE 403	
City-State-Zip:	BOSTON MA 02110	City-State-Zip:	BOSTON MA 02110	

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: DAVID HARELICK

VICE PRESIDENT OF INNOVEST

06/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date