

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000075855

**FILED**  
**Feb 17, 2017**  
**Secretary of State**  
**CC3394155028**

**Entity Name:** CHIPLEY ACRES DEVELOPMENT, LLC

**Current Principal Place of Business:**

19275 BISCAYNE BLVD  
30  
AVENTURA, FL 33020

**Current Mailing Address:**

19275 BISCAYNE BLVD  
30  
AVENTURA, FL 33020

**FEI Number:** 20-3264756

**Certificate of Status Desired:** No

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

PRESSER, REUVEN  
19275 BISCAYNE BLVD  
30  
AVENTURA, FL 33020 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 BITTON, YOAV S  
Address 2961 SW 139TH TERRACE  
City-State-Zip: DAVIE FL 33330

Title MGRM  
Name MORDEHAY, ELI  
Address 1785 NW 38TH AVENUE  
City-State-Zip: LAUDERHILL FL 33311

Title MGRM  
Name CHAKCHAKOV, PINCHAS  
Address 9541 NW 18TH PLACE  
City-State-Zip: PLANTATION FL 33322

Title MGRM  
Name PRESSER, REUVEN  
Address 19275 BISCAYNE BLVD  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name KESHET, LLC  
Address 16470 NE 30TH AVENUE  
City-State-Zip: N. MIAMI BEACH FL 33160

*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:** RUEVEN PRESSER

**MEMBER**

**02/17/2017**

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

\_\_\_\_\_  
Date