

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000003000

**Entity Name:** VIRGINIA STREET DEVELOPERS, LLC

**FILED**  
**Feb 19, 2015**  
**Secretary of State**  
**CC2652552750**

**Current Principal Place of Business:**

2645 SOUTH BAYSHORE DRIVE  
202  
MIAMI, FL 33133

**Current Mailing Address:**

2645 SOUTH BAYSHORE DRIVE  
202  
MIAMI, FL 33133 US

**FEI Number: 74-3157099**

**Certificate of Status Desired: No**

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

GUEST, JAMES M  
50 KINDRED STREET  
201  
STUART, FL 34994 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 VON SCHWAB, ERIC A  
Address 2645 SOUTH BAYSHORE DRIVE  
202  
City-State-Zip: MIAMI FL 33133

Title MGRM  
Name MCCOWEN, JAY S  
Address 14103 RHONE VALLEY DRIVE  
City-State-Zip: CHARLOTTE NC 28278

Title MGRM  
Name MCCOWEN, REBECCA H  
Address 476 TORTOISE VIEW CIRCLE  
City-State-Zip: SATELLITE BEACH FL 32937

*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: ERIC VON SCHWAB**

**MGRM**

**02/19/2015**

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

\_\_\_\_\_  
Date