## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000039394

Entity Name: MINTO FLORIDA HOLDINGS, LLC

**Current Principal Place of Business:** 

4400 W SAMPLE ROAD SUITE 200

COCONUT CREEK, FL 33073

## **Current Mailing Address:**

4400 W SAMPLE ROAD SUITE 200 COCONUT CREEK, FL 33073 US

FEI Number: 02-0774607 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BELMONT, MICHAEL J 4400 WEST SAMPLE ROAD SUITE 200 COCONUT CREEK, FL 33073 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

Authorized Person(s) Detail:

Title Title **PRES** 

Name CARTER, JOHN F Name BELMONT, MICHAEL J

4400 W SAMPLE ROAD STE 200 4400 W SAMPLE ROAD STE 200 Address Address COCONUT CREEK FL 33073 City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip:

٧P Title DIVISION PRES. Title

Name COSTELLO, LILLIAM BULLOCK, WILLIAM L Name

Address 4400 W SAMPLE ROAD 4400 W SAMPLE ROAD Address SUITE 200

SUITE 200

COCONUT CREEK FL 33073 City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip:

VΡ Title SR.VP Title

Name CALE, BRIAN SVOPA, STEVEN M. Name

4400 W SAMPLE ROAD Address 4400 W SAMPLE ROAD Address

SUITE 200 SUITE 200

COCONUT CREEK FL 33073 City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip:

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.

03/20/2019 SIGNATURE: MICHAEL J. BELMONT **PRESIDENT** 

Date

**FILED** Mar 20, 2019

**Secretary of State** 

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