## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064371

Entity Name: OKEECHOBEE #2, LLC

**Current Principal Place of Business:** 

2801 PGA BLVD. SUITE 220 PALM BEACH GARDENS. FL 33410

**Current Mailing Address:** 

2801 PGA BLVD. SUITE 220

PALM BEACH GARDENS. FL 33410

FEI Number: 37-1527914 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WAXMAN, BRIAN K 2801 PGA BLVD. SUITE 220 PALM BEACH GARDENS, FL 33410 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

**FILED** Apr 08, 2014

**Secretary of State** 

CC1073121454

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

WAXMAN, BRIAN K APPLEFIELD, PETER J Name Name 2801 PGA BLVD, SUITE 220 Address 2801 PGA BLVD. SUITE 220 Address

PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 City-State-Zip: City-State-Zip:

Title **AGEN** 

Name LIBERTY, MALI

Address 2801 PGA BLVD, SUITE 220

City-State-Zip: PALM BEACH GARDENS FL 33410

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.

04/08/2014 COO SIGNATURE: MALI LIBERTY