

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000078207

**Entity Name:** 1511 LUCERNE, LLC

**Current Principal Place of Business:**

1005 LAKE AVE  
LAKE WORTH, FL 33460

**Current Mailing Address:**

PO BOX 21349  
W. PALM BEACH, FL 33416

**FEI Number:** 20-5571862

**Certificate of Status Desired:** No

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

ROMANO, JOHN F  
1005 LAKE AVE  
LAKE WORTH, FL 33460 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 WENGIERSKI, TIMOTHY  
Address 364 GOLFOVIEW ROAD  
APT 203  
City-State-Zip: NORTH PALM BEACH FL 33408

Title MGRM  
Name ROMANO, JOHN F  
Address 1005 LAKE AVE  
City-State-Zip: LAKE WORTH FL 33460

Title MGRM  
Name ROMANO, NANCY L  
Address 1005 LAKE AVE  
City-State-Zip: LAKE WORTH FL 33460

*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:** NANCY L ROMANO

MGRM

04/28/2016

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

\_\_\_\_\_ Date