

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000121210

**Entity Name:** 481 MAGELLAN DRIVE, LLC

**Current Principal Place of Business:**

2212 ISLAND ESTATES DRIVE  
PARRISH, FL 34219

**Current Mailing Address:**

2212 ISLAND ESTATES DRIVE  
PARRISH, FL 34219 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

CHAPNICK, BRUCE PESQ.  
2033 MAIN STREET  
SUITE 600  
SARASOTA, FL 34237 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	Title	MGRM
Name	ALVEY, T. BY E., DELBERT GARY	Name	ALVEY, T. BY E., CARMEN JUDINE B
Address	2212 ISLAND ESTATES DRIVE	Address	2212 ISLAND ESTATES DRIVE
City-State-Zip:	PARRISH FL 34219	City-State-Zip:	PARRISH FL 34219

*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:** ALVEY, T. BY E., DELBERT GARY

MGRM

03/16/2017

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

\_\_\_\_\_ Date