

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000060683

**Entity Name:** ROYAL PALMS AT INVERRARY, LLC

**Current Principal Place of Business:**

10155 COLLINS AVE  
APT 503  
BAL HARBOUR, FL 33154

**Current Mailing Address:**

PO BOX 1710  
DANIA BEACH, FL 33004

**FEI Number:** 26-2929142

**Certificate of Status Desired:** No

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

FARBMAN, DAVID MANAGER  
2900 NW 56TH AVE  
LEASING OFFICE  
LAUDERHILL, FL 33313 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 GERSTLE, RUTH E  
Address 10155 COLLINS AVE  
City-State-Zip: BAL HARBOUR FL 33154

Title MGR  
Name RUTH E. GERSTLE TRUST  
Address 10155 COLLINS AVE  
City-State-Zip: BAL HARBOUR FL 33154

Title MGR  
Name FARBMAN, JUDITH T  
Address 10155 COLLINS AVE  
City-State-Zip: BAL HARBOUR FL 33154

Title MGR  
Name GERSTLE, LEONARD  
Address 10155 COLLINS AVE  
City-State-Zip: BAL HARBOUR FL 33154

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID FARBMAN

**MANAGER**

**04/09/2013**

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

\_\_\_\_\_  
Date