## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000059577

Entity Name: 1315 W INDIANTOWN RD LLC

### **Current Principal Place of Business:**

4500 PGA BLVD 207 PALM BEACH GARDENS, FL 33418

## **Current Mailing Address:**

4500 PGA BLVD 207 PALM BEACH GARDENS, FL 33418

# FEI Number: 27-2812675

# Name and Address of Current Registered Agent:

BRANDT, PHILLIP 4500 PGA BLVD 207 PALM BEACH GARDENS, FL 33418 US

FILED Apr 03, 2019

Secretary of State

1011469228CC

Certificate of Status Desired: No

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 :

Authorized Person(s) Detail.				
Title	MGR	Title	MGR	
Name	STEPHANOS, DIANE	Name	GALUI, JUDITH	
Address	4500 PGA BLVD 207	Address	4500 PGA BLVD 207	
City-State-Zip:	PALM BEACH GARDENS FL 33418	City-State-Zip:	PALM BEACH GARDENS FL 33418	
Title	MGR	Title	MGR	
Name	DIVOSTA, CATHY	Name	DIVOSTA, GUY	
Address	4500 PGA BLVD 207	Address	4500 PGA BLVD 207	
City-State-Zip:	PALM BEACH GARDENS FL 33418	City-State-Zip:	PALM BEACH GARDENS FL 33418	
Title	AR			
Name	BRANDT, PHILLIP			
Address	4500 PGA BLVD 207			
City-State-Zip:	PALM BEACH GARDENS FL 33418			
Name Address City-State-Zip: Title Name Address	DIVOSTA, CATHY 4500 PGA BLVD 207 PALM BEACH GARDENS FL 33418 AR BRANDT, PHILLIP 4500 PGA BLVD 207	Name Address	DIVOSTA, GUY 4500 PGA BLVD 207	

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: DIANE STEPHANOS

MGR

Date

Electronic Signature of Signing Authorized Person(s) Detail