

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000109167

**Entity Name:** 587 GOULD BUSINESS CENTER OF EAU GALLIE, LLC

**Current Principal Place of Business:**

587 W EAU GALLIE BLVD  
SUITE 104  
EAU GALLIE, FL 32935

**Current Mailing Address:**

587 W EAU GALLIE BLVD  
SUITE 104  
EAU GALLIE, FL 32935 US

**FEI Number:** 27-3721006

**Certificate of Status Desired:** No

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

GOULD, STEPHEN H  
587 W EAU GALLIE BLVD  
SUITE 104  
EAU GALLIE, FL 32935 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 GOULD, STEPHEN H  
Address 1803 ORANGE ST  
City-State-Zip: MELBOURNE BEACH FL 32951

*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:** STEPHEN GOULD

**MANAGING MEMBER**

**01/20/2016**

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

\_\_\_\_\_  
Date