

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000003812

**Entity Name:** THE BENMORE BUILDING, LLC**Current Principal Place of Business:**133 BENMORE DR  
STE 100  
WINTER PARK, FL 32792**Current Mailing Address:**133 BENMORE DR  
STE 100  
WINTER PARK, FL 32792**FEI Number:** 27-4739878**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BYRON, DEBORAH A  
133 BENMORE DR  
STE 100  
WINTER PARK, FL 32792 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 BAYLOR, JEFFREY E  
Address 133 BENMORE DR SUITE 100  
City-State-Zip: WINTER PARK FL 32792Title MGRM  
Name KIELMOVITCH, IZAK  
Address 133 BENMORE DR SUITE 100  
City-State-Zip: WINTER PARK FL 32792Title MGRM  
Name SPECTOR, BRIAN C  
Address 133 BENMORE DR SUITE 100  
City-State-Zip: WINTER PARK FL 32792Title MANAGING MEMBER  
Name TRAN, HAO  
Address 472 FLETCHER PLACE  
City-State-Zip: WINTER PARK FL 32789Title MGRM  
Name LEHMAN, JEFFREY J  
Address 133 BENMORE DR SUITE 100  
City-State-Zip: WINTER PARK FL 32792Title MGRM  
Name TIPIRNENI, KIRAN  
Address 133 BENMORE DR SUITE 100  
City-State-Zip: WINTER PARK FL 32792Title MGRM  
Name PATNI, AFTAB  
Address 133 BENMORE DR SUITE 100  
City-State-Zip: WINTER PARK FL 32792Title MANAGING MEMBER  
Name KANG, BARRY S  
Address 2844 LINCROFT AVE  
City-State-Zip: ORLANDO FL 32814

*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:** JEFFREY J LEHMAN**MEMBER****02/27/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date