

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000060633

**Entity Name:** 210 ON 210, LLC

**Current Principal Place of Business:**

3055 CR 210 W  
SUITE 103  
ST. JOHNS, FL 32259

**Current Mailing Address:**

625 SR 13 NORTH  
ST. JOHNS, FL 32259

**FEI Number:** 45-2494135

**Certificate of Status Desired:** No

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

DEUTSCH, STEVEN WESQ  
C/O FRANK, WEINBERG & BLACK, P.L.  
7805 S.W. 6TH COURT  
PLANTATION, FL 33324 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 SIMMONS, SHARON  
Address 625 SR 13 NORTH  
City-State-Zip: ST. JOHNS FL 32259

Title MGRM  
Name SIMMONS, MARK  
Address 625 SR 13 NORTH  
City-State-Zip: ST. JOHNS FL 32259

Title MGRM  
Name SIMMONS, JAMES  
Address 625 SR 13 NORTH  
City-State-Zip: ST. JOHNS FL 32259

Title MGRM  
Name BREWER, KRISTIN  
Address 625 SR 13 NORTH  
City-State-Zip: ST. JOHNS FL 32259

*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:** KRISTIN BREWER

**MANAGING MEMBER**

**02/14/2018**

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

\_\_\_\_\_  
Date