# that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOWTHER, ROBERT J, JR. Electronic Signature of Signing Authorized Person(s) Detail

#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L11000071485

Entity Name: ST. GEORGE ISLAND PARTNERSHIP, LLC

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

12737 FORREST DRIVE EDINBORO, PA 16412

### **Current Mailing Address:**

12737 FORREST DRIVE EDINBORO, PA 16412

#### FEI Number: 45-2593457

# Name and Address of Current Registered Agent:

SALVATORI LAW OFFICE, PLLC 5150 TAMIAMI TRAIL NORTH SUITE 304 NAPLES, FL 34103 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: LEO J. SALVATORI

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title MGR LOWTHER. ROBERT J JR. Name Address 12737 FORREST DRIVE City-State-Zip: EDINBORO PA 16412

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 03/21/2019

FILED Mar 21, 2019 Secretary of State 0192083814CC

Certificate of Status Desired: No

Date

MGR

03/21/2019

Date