

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000004118

**Entity Name:** DRC RIVER REALTY LLC

**Current Principal Place of Business:**

4201 N. OCEAN BLVD.  
#C-509  
BOCA RATON, FL 33431

**Current Mailing Address:**

4201 N. OCEAN BLVD.  
#C-509  
BOCA RATON, FL 33431 US

**FEI Number:** 45-4247400

**Certificate of Status Desired:** Yes

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

EL MANN, JOSEPH  
4201 N. OCEAN BLVD.  
#C-509  
BOCA RATON, FL 33431 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 EL MANN, JOSEPH  
Address 4201 N. OCEAN BLVD.  
City-State-Zip: BOCA RATON FL 33431

Title MGRM  
Name EL MANN, MIKE  
Address 4201 N. OCEAN BLVD., SUITE C-509  
City-State-Zip: BOCA RATON FL 33431

Title MGRM  
Name EL MANN, SARAH  
Address 4201 N. OCEAN BLVD., C-509  
City-State-Zip: BOCA RATON FL 33431

Title MRGM  
Name EL MANN, JESSICA  
Address 4201 N. OCEAN BLVD., C-509  
City-State-Zip: BOCA RATON FL 33431

*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:** JOSEPH EL MANN

**MANAGER**

**01/07/2019**

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

\_\_\_\_\_  
Date