

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 17, 2013
Secretary of State
CC6394537788

Entity Name: FLAGLER BROKERAGE AND MANAGEMENT SERVICES LLC

Current Principal Place of Business:

2855 S. LEJEUNE ROAD 4TH FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

2855 S. LEJEUNE ROAD 4TH FLOOR
CORAL GABLES, FL 33134

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COBB, KOLLEEN O.P.
2855 S. LEJEUNE ROAD 4TH FLOOR
CORAL GABLES, FL 33134 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 P
Name SIGNORELLO, VINCENT
Address 2855 S. LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title V
Name GUITAR, JOHN
Address 2855 S. LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VS
Name COBB, KOLLEEN O.P.
Address 2855 S. LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title V
Name TICKELL, KEITH
Address 2855 S. LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VS
Name GODOY, JUAN (RUSTY)
Address 2855 S. LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title V
Name STORMS, JEANNE
Address 2855 S. LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KOLLEEN O.P. COBB

ATTORNEY IN FACT

04/17/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date