

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 10, 2018
Secretary of State
CC6881303294

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 US

FEI Number: 80-0795151

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

Title VP, SECRETARY
Name GODOY, JUAN
Address 2855 S. LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VP
Name STORMES, JEANNE
Address 4348 SOUHTPOINT BLVD
SUITE 330
City-State-Zip: JACKSONVILLE FL 32216

Title VP
Name HOENER, JAMES
Address 4348 SOUTHPOINT BLVD
SUITE 330
City-State-Zip: JACKSONVILLE FL 32216

Title VP
Name SNYDER, MARSHALL BRUCE
Address 2855 S. LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VP
Name SUTTON, CHRISTOPHER J
Address 2855 LE JEUNE RD
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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KOLLEEN O.P. COBB

VICE PRESIDENT

04/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date