## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000080221

Entity Name: AKREA MANAGER, LLC

**Current Principal Place of Business:** 

1400 N.W. 107TH AVENUE, 5TH FLOOR

MIAMI. FL 33172

**Current Mailing Address:** 

1400 N.W. 107TH AVENUE, 5TH FLOOR

MIAMI. FL 33172

FEI Number: 46-0549470 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITHER, ROBERT M

1400 N.W. 107TH AVENUE, 5TH FLOOR

MIAMI, FL 33172 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

**FILED** Apr 10, 2013

**Secretary of State** 

CC8279796414

Authorized Person(s) Detail:

Title MGR Title

ADLER, MICHAEL M ADLER, MICHAEL M Name Name 1400 NW 107TH AVE Address

1400 N.W. 107TH AVENUE, 5TH Address **FLOOR 5T FLOOR** 

City-State-Zip: MIAMI FL 33172 City-State-Zip: MIAMI FL 33172

Title Title

Name ADLER, MATTHEW Name SMITHER, ROBERT

1400 NW 107TH AVE 1400 NW 107TH AVE Address Address

**5TH FLOOR 5TH FLOOR** 

City-State-Zip: MIAMI FL 33172 City-State-Zip: MIAMI FL 33172

Title S, T

Name GATO, GERARDO Address 1400 NW 107TH AVE

**5TH FLOOR** 

City-State-Zip: MIAMI FL 33172

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.

**VP** 

SIGNATURE: ROBERT SMITHER

Electronic Signature of Signing Authorized Person(s) Detail

04/10/2013

Date