

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000142924

Entity Name: ALTERASCAPE, LIMITED LIABILITY COMPANY

Current Principal Place of Business:

3600 COMMERCE BLVD
KISSIMMEE, FL 34741

Current Mailing Address:

3600 COMMERCE BLVD
NOC
KISSIMMEE, FL 34741 US

FEI Number: 46-1373895

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOVELL, WILLIAM D
3600 COMMERCE BLVD
NOC
KISSIMMEE, FL 34741 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 CHAIRMAN
Name LOVELL, WILLIAM
Address 2255 GLADES ROAD
City-State-Zip: BOCA RATON FL 33431

Title MANAGING MEMBER
Name PETER, SHEPTAK
Address 2255 GLADES ROAD
City-State-Zip: BOCA RATON FL 33431

Title MANAGING MEMBER
Name WELLS, JACK
Address 2255 GLADES ROAD
City-State-Zip: BOCA RATON FL 33431

Title MANAGING MEMBER
Name MONTGOMERY, ROBERT
Address 3600 COMMERCE BLVD
NOC
City-State-Zip: KISSIMMEE FL 34741

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: WILLIAM D. LOVELL

MEMBER MANAGER

03/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date