## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000152180

Entity Name: FC ATLANTIC COMMONS PHASE II, LLC

### **Current Principal Place of Business:**

2199 PONCE DE LEON BLVD. SUITE 201 CORAL GABLES, FL 33134

## **Current Mailing Address:**

P.O. BOX 3435 WEST PALM BEACH, FL 33401 US

## FEI Number: 46-1565845

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

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 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	: DIANA SERRA, VICE PRESIDENT			04/24/2017
	Electronic Signature of Registered Agent			Date
Authorized	Person(s) Detail :			
Title	MANAGER	Title	PRESIDENT	
Name	FCI RESIDENTIAL CORPORATION	Name	FANJUL, JOSE F JR.	
Address	2199 PONCE DE LEON BLVD.	Address	P.O. BOX 3435	
City-State-Zip:	SUITE 201 CORAL GABLES FL 33134	City-State-Zip:	WEST PALM BEACH FL 3340	1
<b>T</b> :0.		Title	VP	
Title		Name	PORRO, JUAN C	
Name	BLOMQVIST, ERIK J.	Address	P.O. BOX 3435	
Address	P.O. BOX 3435 WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 3340	1
City-State-Zip:	WEST PALM BEACH FL 33401	Title	VP, SECRETARY	
Title	VP, ASST. TREASURER	Name	TABERNILLA, ARMANDO A	
Name	ROSS, DANIEL D	Address	P.O. BOX 3435	
Address	P.O. BOX 3435			4
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 3340	I
		Title	VP, FINANCE & TREASURER	
Title	VICE PRESIDENT OF TAXATION	Name	LONDONO, ALEJANDRO	
Name	ZUKOWSI, PHILIP M	Address	P.O. BOX 3435	
Address	P.O. BOX 3435	City-State-Zip:	WEST PALM BEACH FL 3340	1
City-State-Zip:	WEST PALM BEACH FL 33401			

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: ARMANDO A. TABERNILLA

VICE PRESIDENT

04/24/2017

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Apr 24, 2017 Secretary of State CC5284593796

Certificate of Status Desired: No

Date