

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000059316

Entity Name: TMSA ALTIS 5040, LLC**Current Principal Place of Business:**7491 W. OAKLAND PARK BLVD. SUITE 306
LAUDERHILL, FL 33319**Current Mailing Address:**7491 W. OAKLAND PARK BLVD. SUITE 306
LAUDERHILL, FL 33319**FEI Number:** 46-2600470**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAPIERRE, REJEAN
7491 W. OAKLAND PARK BLVD. SUITE 306
LAUDERHILL, FL 33319 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 |
| Name | GUERRA, FRANK |
| Address | 7491 W. OAKLAND PARK BLVD. SUITE 306 |
| City-State-Zip: | LAUDERHILL FL 33319 |

| | |
|-----------------|---------------------------------------|
| Title | MGRV |
| Name | THIBAUT, BERNARD |
| Address | 7491 W. OAKLAND PARK BLVD., SUITE 306 |
| City-State-Zip: | LAUDERHILL FL 33319 |

| | |
|-----------------|---------------------------------------|
| Title | MGRV |
| Name | REPENTIGNY, JOSEE |
| Address | 7491 W. OAKLAND PARK BLVD., SUITE 306 |
| City-State-Zip: | LAUDERHILL FL 33319 |

| | |
|-----------------|--------------------------------------|
| Title | MGRP |
| Name | LAPIERRE, REJEAN |
| Address | 7491 W. OAKLAND PARK BLVD. SUITE 306 |
| City-State-Zip: | LAUDERHILL FL 33319 |

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: FRANK GUERRA

VP

01/08/2015

Electronic Signature of Signing Authorized Person(s) Detail_____
Date