

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000094203

**FILED**  
**Jan 11, 2019**  
**Secretary of State**  
**9519646512CC**

**Entity Name:** 1114 BELAIR DR. BOCA RATON, LLC

**Current Principal Place of Business:**

1118 BEL AIR DR  
HIGHLAND BEACH, FL 33487

**Current Mailing Address:**

1118 BEL AIR DR  
HIGHLAND BEACH, FL 33487 US

**FEI Number:** 46-3103030

**Certificate of Status Desired:** No

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

GRANER, THOMAS U  
720 E PALMETTO PARK RD  
BOCA RATON, FL 33432 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	MGR	Title	AUTHORIZED MEMBER
Name	GIACHETTI, AL	Name	BLANCHE, BARBARA
Address	1118 BEL AIR DR	Address	1118 BEL AIR DR APT #3
City-State-Zip:	HIGHLAND BEACH FL 33487	City-State-Zip:	HIGHLAND FL 33483
Title	CONTROLLER		
Name	BOCLAIR, FRANK		
Address	215 SHADY NOOK HILL		
City-State-Zip:	HARLEYSVILLE PA 19438		

*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 BOCLAIR

**CONTROLLER**

**01/11/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date