

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000100525

**Entity Name:** BRISTOL PINES, LLC**Current Principal Place of Business:**2385 NW EXECUTIVE CENTER DRIVE  
SUITE 370  
BOCA RATON, FL 33431**Current Mailing Address:**2385 NW EXECUTIVE CENTER DRIVE  
SUITE 370  
BOCA RATON, FL 33431 US**FEI Number:** 46-3194633**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOBEL, JEFFREY E  
2385 NW EXECUTIVE CENTER DRIVE  
SUITE 370  
BOCA RATON, FL 33431 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	MGRM
Name	JEFFREY E. SOBEL TRUSTEE UAD 7/24/98 TRUST
Address	2385 NW EXECUTIVE CENTER DRIVE SUITE 370
City-State-Zip:	BOCA RATON FL 33431

Title	MANAGER
Name	DAW FAMILY HOLDINGS
Address	3715 SOUTH OCEAN BLVD
City-State-Zip:	HIGHLAND BEACH FL 33487

Title	MEMBER
Name	S&C SOBEL, LLLP
Address	2385 NW EXECUTIVE CENTER DRIVE SUITE 370
City-State-Zip:	BOCA RATON FL 33431

Title	MGRM
Name	SAMUEL R. SOBEL TRUSTEE UAD 11/13/73 TRUST
Address	2385 NW EXECUTIVE CENTER DRIVE SUITE 370
City-State-Zip:	BOCA RATON FL 33431

Title	MEMBER
Name	BRISTOL PINES DEVELOPMENT, LLC
Address	2385 NW EXECUTIVE CENTER DRIVE SUITE 370
City-State-Zip:	BOCA RATON FL 33431

*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:** JEFFREY E. SOBEL**MANAGER****04/27/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date