

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000101845

**Entity Name:** NORTH STRAUB PARK, LLC

**Current Principal Place of Business:**

259 THIRD STREET NORTH  
ST PETERSBURG, FL 33701

**Current Mailing Address:**

POST OFFICE BOX 30  
ST. PETERSBURG, FL 33731 US

**FEI Number:** 46-3371197

**Certificate of Status Desired:** No

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

WALLACE, PETER R  
259 THIRD STREET NORTH  
ST PETERSBURG, FL 33701 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	MANAGER/AUTHORIZED MEMBER	Title	MANAGER/AUTHORIZED MEMBER
Name	WALLACE, HELEN P.	Name	WALLACE, PETER R.
Address	POST OFFICE BOX 30	Address	POST OFFICE BOX 30
City-State-Zip:	ST. PETERSBURG FL 33731	City-State-Zip:	ST. PETERSBURG FL 33731

*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:** PETER R WALLACE

**MANAGER**

**04/30/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date