

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000102786

**Entity Name:** SECOND AVENUE FELDMAN TOWER LLC

**Current Principal Place of Business:**

135 W. CENTRAL BLVD., SUITE 900  
ORLANDO, FL 32801

**Current Mailing Address:**

135 W. CENTRAL BLVD., SUITE 900  
ORLANDO, FL 32801 US

**FEI Number:** 80-0941847

**Certificate of Status Desired:** No

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

STEIN, CLIFFORD L  
135 W. CENTRAL BLVD., SUITE 900  
ORLANDO, FL 32801 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  
Name           ST. PETE TOWER, LLC  
Address        135 W. CENTRAL BLVD., SUITE 900  
City-State-Zip: ORLANDO FL 32801

Title           MANAGER  
Name           2ND AVENUE FELDMAN, LLC  
Address        100 SOUTH ASHLEY DRIVE, SUITE  
                  200  
City-State-Zip: TAMPA FL 33602

*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:** REID BERMAN

**MANAGER**

**03/15/2019**

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

\_\_\_\_\_  
Date