

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000139004

**Entity Name:** WAYPOINT ESTERO OWNER, LLC

**Current Principal Place of Business:**

10234 W STATE RD 84  
DAVIE, FL 33324

**Current Mailing Address:**

10234 W STATE RD 84  
DAVIE, FL 33324 US

**FEI Number: 46-3800231**

**Certificate of Status Desired: No**

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

CASTRO, ROBERT T  
10234 W STATE RD 84  
DAVIE, FL 33324 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  
Name CASTRO, ROBERT T  
Address 10234 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title MGR  
Name CASTRO, SOFIA C  
Address 10234 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title MGR  
Name CASTRO, BARBARA R  
Address 10238 W STATE RD 84  
City-State-Zip: DAVIE FL 33324

Title MGR  
Name CASTRO, ERIC R  
Address 10238 W STATE 84  
City-State-Zip: DAVIE FL 33324

*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: BARBARA CASTRO**

**MANAGER**

**04/10/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date