

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000150570

**Entity Name:** 3375-3385 BURNS ROAD, LLC

**Current Principal Place of Business:**

3375 BURNS ROAD  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

3375/3385 BURNS ROAD, LLC  
C/O COHEN COMMERCIAL, P.O. BOX 14127  
NORTH PALM BEACH, FL 33408 US

**FEI Number:** 94-6518786

**Certificate of Status Desired:** No

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

HAMBY, LOUIS L III  
340 ROYAL POINCIANA WAY, SUITE 321  
PALM BEACH, FL 33480 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 FRANK, ROGER  
Address 3375 BURNS ROAD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MGR  
Name FRANK, ROBERT L  
Address 3375 BURNS ROAD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MGR  
Name SCHAMBARGER, MARGARET  
Address 3375 BURNS ROAD  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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:** ROBERT L FRANK

MGR

03/07/2018

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

\_\_\_\_\_ Date