

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000027564

**Entity Name:** NETWORK COMMUNITY DEVELOPMENT & MANAGEMENT, LLC

**FILED**  
**Jan 05, 2018**  
**Secretary of State**  
**CC3705842628**

**Current Principal Place of Business:**

8362 PINES BLVD  
348  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

8362 PINES BLVD  
348  
PEMBROKE PINES, FL 33024 US

**FEI Number: 46-4957243**

**Certificate of Status Desired: No**

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

FUCIEN, EROLD  
8362  
PINES BLVD 348  
PEMBROKE PINES, FL 33024 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 FUCIEN, EROLD  
Address 8362 PINES BLVD  
348  
City-State-Zip: PEMBROKE PINES FL 33024

*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: EROLD FUCIEN**

**MGRM**

**01/05/2018**

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

\_\_\_\_\_  
Date