

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000027648

**Entity Name:** SURFSIDE LEGACY, LLC

**Current Principal Place of Business:**

1691 MICHIGAN AVENUE,  
SUITE # 360  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1691 MICHIGAN AVENUE,  
SUITE # 360  
MIAMI BEACH, FL 33139 US

**FEI Number:** 46-4865946

**Certificate of Status Desired:** No

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

HOWARD, EUGENE J ESQ.  
1691 MICHIGAN AVENUE,  
SUITE # 360  
MIAMI BEACH, FL 33139 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 HOWARD, ELSIE  
Address 1691 MICHIGAN AVENUE,  
SUITE # 360  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name HOWARD, EUGENE J.  
Address 1691 MICHIGAN AVENUE,  
SUITE # 360  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name TANDY, HEIDI  
Address 1691 MICHIGAN AVENUE,  
SUITE # 360  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name BROWN, ELIZABETH  
Address 1691 MICHIGAN AVENUE,  
SUITE # 360  
City-State-Zip: MIAMI BEACH FL 33139

*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:** EUGENE J HOWARD

AMBR

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date