

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000039824

Entity Name: PARK POINTE APARTMENTS, LLC

Current Principal Place of Business:

4600 W. KENNEDY BLVD.
SUITE 100
TAMPA, FL 33609

Current Mailing Address:

PO BOX 18593
TAMPA, FL 33679

FEI Number: 46-5037224

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALBERT SALEM AND ASSOCIATES, PA
4600 W. KENNEDY BLVD
SUITE 100
TAMPA, FL 33609 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 SALEM, ALBERT M III
Address PO BOX 18593
City-State-Zip: TAMPA FL 33679

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: ALBERT M SALEM III

MEMBER

04/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date