## 2016 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

**FILED** Apr 26, 2016

**Secretary of State** 

CC2631190894

## Authorized Person(s) Detail:

Title MGR

SALEM, ALBERT M III Name

PO BOX 18593 Address 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 MANAGER

04/26/2016