

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000122002

Entity Name: CSB5 LLC

Current Principal Place of Business:

3623 N ANDREWS AVE
OAKLAND PARK, FL 33309

Current Mailing Address:

3623 N ANDREWS AVE
OAKLAND PARK, FL 33309 US

FEI Number: 47-1510348

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RICHARD M. MOGERMAN, P.A.
8211 WEST BROWARD BOULEVARD
SUITE 200
PLANTATION, FL 33324 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 BROWN, BARNETT
Address 3623 N ANDREWS AVE
City-State-Zip: OAKLAND PARK FL 33309

Title MANAGER
Name CRUISE, ROBIN
Address 3623 N ANDREWS AVE
City-State-Zip: OAKLAND PARK FL 33309

Title MANAGER
Name BROWN, ADAM
Address 3623 N ANDREWS AVE
City-State-Zip: OAKLAND PARK FL 33309

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: ROBIN CRUISE

MANAGER

02/05/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date