

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000124804

**Entity Name:** BOUND BROOK ASSOCIATES I, LLC

**Current Principal Place of Business:**

C/O THE HERRICK COMPANY, INC.  
2295 CORPORATE BLVD. NW, SUITE 222  
BOCA RATON, FL 33431

**Current Mailing Address:**

C/O THE HERRICK COMPANY, INC.  
2295 CORPORATE BLVD. NW, SUITE 222  
BOCA RATON, FL 33431

**FEI Number: 59-2520780**

**Certificate of Status Desired: Yes**

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

THE HERRICK COMPANY, INC.  
2295 CORPORATE BLVD. NW  
SUITE 222  
BOCA RATON, FL 33431 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            CEO, SECRETARY  
Name            HERRICK, NORTON  
Address        2295 CORPORATE BLVD, NW, SUITE  
                  222  
City-State-Zip: BOCA RATON FL 33431

Title            EXEC. VP, ASST. SECRETARY  
Name            HERRICK, ELAYNE  
Address        C/O THE HERRICK COMPANY, INC.  
                  2295 CORPORATE BLVD. NW, SUITE  
                  222  
City-State-Zip: BOCA RATON FL 33431

Title            EXEC. VP, ASST. SECRETARY  
Name            HERRICK, HOWARD  
Address        C/O THE HERRICK COMPANY, INC.  
                  2295 CORPORATE BLVD. NW, SUITE  
                  222  
City-State-Zip: BOCA RATON FL 33431

Title            PRESIDENT, ASST. SECRETARY  
Name            HERRICK, MICHAEL  
Address        C/O THE HERRICK COMPANY, INC.  
                  2295 CORPORATE BLVD. NW, SUITE  
                  222  
City-State-Zip: BOCA RATON FL 33431

Title            EXEC. VP, TREASURER  
Name            HERRICK, EVAN  
Address        C/O THE HERRICK COMPANY, INC.  
                  2295 CORPORATE BLVD. NW, SUITE  
                  222  
City-State-Zip: BOCA RATON FL 33431

*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: NORTON HERRICK**

**CEO**

**03/28/2023**

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

\_\_\_\_\_  
Date