

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000132248

**Entity Name:** 200 WYNDEMERE WAY #304 LLC

**Current Principal Place of Business:**

200 WYNDEMERE WAY #304  
NAPLES, FL 34105

**Current Mailing Address:**

C/O GIRAFFE GROUP  
5701 HARBOUR RIDGE ROAD  
MIDLOTHIAN, VA 23112 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

BAUER, GWEN B  
1609 CHINABERRY WAY  
NAPLES, FL 34105 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           MANAGER  
Name           THE GIRAFFE GROUP LLC  
Address       5701 HARBOUR RIDGE ROAD  
City-State-Zip: MIDLOTHIAN VA 23112

*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:** GWEN BAUER

**AGENT**

**02/07/2019**

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

\_\_\_\_\_  
Date