## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000146314

Entity Name: FCI DEVELOPMENT TWELVE, LLC

**Current Principal Place of Business:** 

2199 PONCE DE LEON BLVD.

SUITE 201

CORAL GABLES, FL 33134

**Current Mailing Address:** 

P.O. BOX 3435

WEST PALM BEACH, FL 33401

FEI Number: 47-1928268 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E

PALM BEACH GARDENS, FL 33410 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:

Date Electronic Signature of Registered Agent

Address

Authorized Person(s) Detail:

PRESIDENT VICE PRESIDENT & ASSISTANT Title Title

**SECRETARY** FANJUL, JOSE F JR Name

ROSS, DANIEL D Name P.O. BOX 3435 Address Address P.O. BOX 3435

City-State-Zip: WEST PALM BEACH FL 33401

City-State-Zip: WEST PALM BEACH FL 33401

Title VICE PRESIDENT OF TAXATION Title SENIOR VICE PRESIDENT

Name ZUKOWSKI, PHILIP M Name BLOMQVIST, ERIK J

Address P.O. BOX 3435 P.O. BOX 3435 Address

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

VΡ Title

VICE PRESIDENT & SECRETARY Title Name PORRO, JUAN C

Name TABERNILLA, ARMANDO A P.O. BOX 3435 Address

City-State-Zip: WEST PALM BEACH FL 33401

City-State-Zip: WEST PALM BEACH FL 33401

Title MANAGER Title VP, FINANCE & TREASURER FCI RESIDENTIAL CORPORATION Name Name LONDONO, ALEJANDRO

2199 PONCE DE LEON BLVD. Address

Address P.O. BOX 3435 SUITE 201

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: CORAL GABLES FL 33134

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: ARMANDO A. TABERNILLA

VICE PRESIDENT

P.O. BOX 3435

04/24/2017

**FILED** Apr 24, 2017

Secretary of State

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