

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000151556

**Entity Name:** ATS BREAKWATER PROPERTIES LLC

**Current Principal Place of Business:**

508 N HARBOR CITY BLVD  
MELBOURNE, FL 32935

**Current Mailing Address:**

P.O. BOX 1929  
MELBOURNE, FL 32901 US

**FEI Number:** 47-1952148

**Certificate of Status Desired:** No

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

EASLER LAW, PLLC  
508 N HARBOR CITY BLVD  
MELBOURNE, FL 32935 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:** ANDREW EASLER

01/27/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name EASLER, ANDREW DAVID  
Address PO BOX 1929  
City-State-Zip: MELBOURNE FL 32901

Title AUTHORIZED MEMBER  
Name WHITE, JAMES TIMOTHY  
Address PO BOX 1929  
City-State-Zip: MELBOURNE FL 32901

Title AUTHORIZED MEMBER  
Name WHITE, SUSAN PAULINE  
Address PO BOX 1929  
City-State-Zip: MELBOURNE FL 32901

Title AUTHORIZED MEMBER  
Name WHITE, TIM  
Address PO BOX 1929  
City-State-Zip: MELBOURNE FL 32901

*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:** JAMES T WHITE

MGR

01/27/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date