

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000153754

**Entity Name:** AGANTIC GROUP, LLC

**Current Principal Place of Business:**

10752 DEERWOOD PARK BLVD  
STE 100  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

12620 BEACH BLVD.  
STE 330  
JACKSONVILLE, FL 32246 US

**FEI Number:** 47-2022432

**Certificate of Status Desired:** Yes

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

PRAMESHUBER, AGAN  
10752 DEERWOOD PARK BLVD  
STE 100  
JACKSONVILLE, FL 32256 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 AMBR  
Name PRAMESHUBER, AGAN  
Address 12620 BEACH BLVD. SUITE 330  
City-State-Zip: JACKSONVILLE FL 32246

Title MGR  
Name PRAMESHUBER, UNA  
Address 12620 BEACH BLVD - STE 330  
City-State-Zip: JACKSONVILLE FL 32246

Title MANAGER  
Name CONOLLY , ROBERT C  
Address 12620 BEACH BLVD.  
STE 330  
City-State-Zip: JACKSONVILLE FL 32246

*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:** AGAN PRAMESHUBER

**OWNER**

**05/29/2020**

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

\_\_\_\_\_  
Date