

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000156979

**Entity Name:** BEACH BOX INVESTORS, LLC

**Current Principal Place of Business:**

C/O KEVIN A. DENTI, ESQ.  
KEVIN A. DENTI, P.A. 2180 IMMOKALEE ROAD - SUITE #316  
NAPLES, FL 34110

**Current Mailing Address:**

C/O KEVIN A. DENTI, ESQ.  
KEVIN A. DENTI, P.A. 2180 IMMOKALEE ROAD - SUITE #316  
NAPLES, FL 34110 US

**FEI Number:** 47-2060105

**Certificate of Status Desired:** No

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

DENTI, KEVIN A ESQ  
KEVIN A. DENTI, P.A.  
2180 IMMOKALEE ROAD - SUITE #316  
NAPLES, FL 34110 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            CIOFFI, RALPH  
Address        3595 GIN LANES  
City-State-Zip: NAPLES FL 34102

*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:** RALPH CIOFFI

**MANAGER**

**03/31/2017**

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

\_\_\_\_\_  
Date