

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000166505

**Entity Name:** 19TH AVENUE NW SUBDIVISION LLC

**Current Principal Place of Business:**

1409 TECH BLVD., SUITE 1  
TAMPA, FL 33619

**Current Mailing Address:**

1409 TECH BLVD., SUITE 1  
TAMPA, FL 33619

**FEI Number:** 47-2282272

**Certificate of Status Desired:** No

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

BREWER, CHRISTOPHER W  
400 N. ASHLEY DRIVE, SUITE 1100  
TAMPA, FL 33602 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 MGR  
Name RIPA, FRANK P  
Address 1409 TECH BLVD., SUITE 1  
City-State-Zip: TAMPA FL 33619

*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:** FRANK RIPA

MGR

03/15/2017

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

\_\_\_\_\_  
Date