

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000181576

**Entity Name:** 2779D EAST EMORY DRIVE LLC

**Current Principal Place of Business:**

611 SW SARAZEN AVENUE  
PORT ST LUCIE, FL 34953

**Current Mailing Address:**

611 SW SARAZEN AVENUE  
PORT ST LUCIE, FL 34953

**FEI Number:** 47-2388578

**Certificate of Status Desired:** No

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

PASCALLI, DEBORAH  
611 SW SARAZEN AVENUE  
PORT ST LUCIE, FL 34953 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                    | Title           | MGR                    |
| Name            | PASCALLI, DEBORAH      | Name            | ROOS, TIMOTHY          |
| Address         | 611 SW SARAZEN AVENUE  | Address         | 611 SW SARAZEN AVENUE  |
| City-State-Zip: | PORT ST LUCIE FL 34953 | City-State-Zip: | PORT ST LUCIE FL 34953 |

*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:** DEBORAH PASCALLI

**PRESIDENT**

**03/11/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date