

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000190375

**Entity Name:** ACUMENT GROUP, LLC

**Current Principal Place of Business:**

2500 WOODSIDE DRIVE  
C/O PAUL SCHULER  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

2500 WOODSIDE DRIVE  
C/O PAUL SCHULER  
FORT LAUDERDALE, FL 33312 US

**FEI Number:** 47-3406790

**Certificate of Status Desired:** No

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

SCHULER, PAUL A  
2500 WOODSIDE DRIVE  
FORT LAUDERDALE, FL 33312 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	MANAGING MEMBER
Name	SCHULER, PAUL A	Name	LYNCH, MICHAEL P
Address	2500 WOODSIDE DRIVE	Address	12200 CANAL GRANDE DR
City-State-Zip:	FORT LAUDERDALE FL 33312	City-State-Zip:	FORT MYERS FL 33913
Title	TAX MATTERS MANAGER		
Name	BOESE, JENNIFER L		
Address	1224 SKY HILL PLACE		
City-State-Zip:	WAKE FOREST NC 27587		

*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:** JENNIFER L. BOESE

**TAX MATTERS MGR.**

**04/17/2021**

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

\_\_\_\_\_  
Date