### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000190817

Entity Name: 5 SEASONS DEVELOPMENT LLC

**Current Principal Place of Business:** 

4825 N DIXIE HWY A OAKLAND PARK, FL 33334

# **Current Mailing Address:**

4825 N DIXIE HWY A OAKLAND PARK, FL 33334

# FEI Number: APPLIED FOR

# Name and Address of Current Registered Agent:

COONS, THOMAS 888 S ANDREWS AVE FT LAUDERDALE, FL 33315 US FILED Apr 30, 2015 Secretary of State CC7572811695

Certificate of Status Desired: Yes

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

# Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	DOMINGUES, JOHN	Name	DOMINGUES, MANUEL
Address	94 W VALLEY BROOK RD	Address	55 PAVONIA AVE
City-State-Zip:	CALIFON NJ 07830	City-State-Zip:	KEARNY NJ 07032
Title	MGR	Title	MGR
Name	AMORIM, MANUEL	Name	TAVARES, FRANCISCO
Address	2 NICHOLAS CT	Address	52 PARLIN LANE
City-State-Zip:	ANNANDALE NJ 08801	City-State-Zip:	WATCHUNG NJ 07069
Title	MGR		
Name	PEREIRA, FRANCISCO		
Address	1169 IRVIN AVE		
City-State-Zip:	UNION NJ 07083		

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: JOHN DOMINGUES

MGR

Electronic Signature of Signing Authorized Person(s) Detail

Date