## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000130544

Entity Name: BOUCHER BROTHERS KIDS CLUB, LLC

**Current Principal Place of Business:** 

1451 OCEAN DRIVE, SUITE 205 MIAMI BEACH. FL 33139

**Current Mailing Address:** 

1451 OCEAN DRIVE, SUITE 205 MIAMI BEACH, FL 33139

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATTS-FITZGERALD, ABIGAIL C C/O DEVINE GOODMAN RASCO & WATTS-FITZGERAL 2800 PONCE DE LEON BOULEVARD, SUITE 1400 CORAL GABLES, FL 33134 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

FILED Jun 30, 2020

**Secretary of State** 

2341714127CC

Authorized Person(s) Detail:

Title PRESIDENT Title VP

Name BOUCHER, JAMES R Name BOUCHER, MICHAEL

Address 1451 OCEAN DRIVE, SUITE 205 Address 1451 OCEAN DRIVE, SUITE 205

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title VP Title VP, SECRETARY, TREASURER

Name BOUCHER, STEVEN Name BOUCHER, PERRY

Address 1451 OCEAN DRIVE, SUITE 205 Address 1451 OCEAN DRIVE, SUITE 205

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title CFO

Name CEDRATI, ADAM

Address 1451 OCEAN DRIVE, SUITE 205

City-State-Zip: MIAMI BEACH FL 33139

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: ADAM A. CEDRATI

Electronic Signature of Signing Authorized Person(s) Detail

**CFO** 

06/30/2020