

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000141489

Entity Name: AVH NORTH FLORIDA, LLC**Current Principal Place of Business:**8601 NORTH SCOTTSDALE ROAD
SCOTTSDALE, AZ 85253**Current Mailing Address:**8601 NORTH SCOTTSDALE ROAD
SCOTTSDALE, AZ 85253**FEI Number:** 47-4935307**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PRESIDENT	Title	EXECUTIVE VICE PRESIDENT AND TREASURER
Name	MULAC, JOSEPH C III	Name	BURNETT, MICHAEL S
Address	8601 NORTH SCOTTSDALE ROAD SUITE 225	Address	8601 NORTH SCOTTSDALE ROAD SUITE 225
City-State-Zip:	SCOTTSDALE AZ 85253	City-State-Zip:	SCOTTSDALE AZ 85253
Title	EXECUTIVE VICE PRESIDENT AND SECRETARY	Title	DIVISION PRESIDENT
Name	SHULLAW, S GARY	Name	SMITH, DAVID
Address	8601 NORTH SCOTTSDALE ROAD SUITE 225	Address	8601 NORTH SCOTTSDALE ROAD SUITE 225
City-State-Zip:	SCOTTSDALE AZ 85253	City-State-Zip:	SCOTTSDALE AZ 85253
Title	VICE PRESIDENT AND QUALIFIED BROKER	Title	VICE PRESIDENT AND ASST. GENERAL COUNSEL
Name	BRATVOLD, VICKI	Name	KONDERIK, MELISA BOROSS
Address	8601 NORTH SCOTTSDALE ROAD SUITE 225	Address	8601 NORTH SCOTTSDALE ROAD SUITE 225
City-State-Zip:	SCOTTSDALE AZ 85253	City-State-Zip:	SCOTTSDALE AZ 85253
Title	VICE PRESIDENT OF OPERATIONS		
Name	BUDD, SHAWN		
Address	8601 NORTH SCOTTSDALE ROAD SUITE 225		
City-State-Zip:	SCOTTSDALE AZ 85253		

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: S GARY SHULLAW**EVP AND SECRETARY****04/27/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date