

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000156243

Entity Name: FCI CAMINO, LLC

Current Principal Place of Business:

2199 PONCE DE LEON BLVD.
SUITE 201
CORAL GABLES, FL 33134

Current Mailing Address:

P.O. BOX 3435
WEST PALM BEACH, FL 33401

FEI Number: 47-5264469

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD
221E
PALM BEACH GARDENS, FL 33410 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
Name: FANJUL, JOSE F. JR.
Address: ONE NORTH CLEMATIS ST.
200
City-State-Zip: WEST PALM BEACH FL 33401

Title: VP
Name: HERNANDEZ, OSCAR R.
Address: ONE NORTH CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title: VICE PRESIDENT & ASSISTANT SECRETARY
Name: ROSS, DANIEL D.
Address: ONE NORTH CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title: VP, TAXATION
Name: ZUKOWSKI, PHILIP M.
Address: ONE NORTH CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title: SENIOR VICE PRESIDENT & TREASURER
Name: BLOMQUIST, ERIK J.
Address: ONE NORTH CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title: VP
Name: PORRO, JUAN C.
Address: ONE NORTH CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title: VICE PRESIDENT & SECRETARY
Name: TABERNILLA, ARMANDO A.
Address: ONE NORTH CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM NEACH FL 33401

Title: MANAGER
Name: FCI RESIDENTIAL CORPORATION
Address: ONE NORTH CLEMATIS STREET
200
City-State-Zip: WEST PALM BEACH FL 33401

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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: ARMANDO A. TABERNILLA

VICE PRESIDENT &
SECRETARY

03/31/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title AUTHORIZED MEMBER
Name FLORIDA CRYSTALS CORPORATION
Address ONE NORTH CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401