

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000164954

Entity Name: KZ PROPERTY HOLDINGS, LLC**Current Principal Place of Business:**5009 N CENTRAL AVE
TAMPA, FL 33603**Current Mailing Address:**5009 N CENTRAL AVE
TAMPA, FL 33603 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STILLWELL, KENNETH
5009 N CENTRAL AVE
TAMPA, FL 33603 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:** KENNETH STILLWELL

01/24/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name DISTRESSED ASSET BUYERS II, LLC
Address 5009 N CENTRAL AVE
City-State-Zip: TAMPA FL 33603

Title MANAGER
Name CROSS, DOLMAR
Address 5009 N CENTRAL AVE
City-State-Zip: TAMPA FL 33603

Title MANAGER
Name ABLOLA, FRANCIS
Address 5009 N CENTRAL AVE
City-State-Zip: TAMPA FL 33603

Title MANAGER
Name HANSON, BRIAN
Address 5009 N CENTRAL AVE
City-State-Zip: TAMPA FL 33603

Title MANAGER
Name LYEW-AYEE, ADRIAN
Address 5009 N CENTRAL AVE
City-State-Zip: TAMPA FL 33603

Title MANAGER
Name RICH, ANTHONY
Address 5009 N CENTRAL AVE
City-State-Zip: TAMPA FL 33603

Title MANAGER
Name DUNN, RICHARD
Address 5009 N CENTRAL AVE
City-State-Zip: TAMPA FL 33603

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: FRANK A LAFALCE

ATTORNEY

01/24/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date