

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000189998

Entity Name: APPLEBY MANAGEMENT LLC**Current Principal Place of Business:**1345 S FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33411**Current Mailing Address:**1345 S FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33411**FEI Number:** 47-5533364**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**APPLEBY, A EDWARD
2301 SUNRISE KEY BLVD
FT. LAUDERDALE, FL 33304 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 MGR
Name APPLEBY, A EDWARD
Address 2301 SUNRISE KEY BLVD
City-State-Zip: FT. LAUDERDALE FL 33304

Title MGR
Name APPLEBY, LINDA
Address 2301 SUNRISE KEY BLVD
City-State-Zip: FT. LAUDERDALE FL 33304

Title PRESIDENT
Name APPLEBY, A. EDWARD
Address 1345 S FEDERAL HIGHWAY
City-State-Zip: DEERFIELD BEACH FL 33411

Title VP
Name APPLEBY, LINDA
Address 1345 S FEDERAL HIGHWAY
City-State-Zip: DEERFIELD BEACH FL 33411

Title VP
Name KING, W. CLAY
Address 1345 S FEDERAL HIGHWAY
City-State-Zip: DEERFIELD BEACH FL 33411

Title VP
Name GALE, JEFF
Address 1345 S FEDERAL HIGHWAY
City-State-Zip: DEERFIELD BEACH FL 33411

Title VS
Name ROHAN, NORM
Address 1345 S FEDERAL HIGHWAY
City-State-Zip: DEERFIELD BEACH FL 33411

Title VT
Name MONTGOMERY, MARK
Address 1345 S FEDERAL HIGHWAY
City-State-Zip: DEERFIELD BEACH FL 33411

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: A. EDWARD APPLEBY

MGR

04/23/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date