### 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: GLENN PEARSON Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L15000193929

Entity Name: LIVINGSTON FAMILY COMMUNITIES LLC.

#### **Current Principal Place of Business:**

1971 W LUMSDEN RD STE 340 BRANDON, FL 33511

## **Current Mailing Address:**

1971 W LUMSDEN RD STE 340 BRANDON, FL 33511

#### FEI Number: 47-5625164

Name and Address of Current Registered Agent:

COMINGORE, PAUL C. 1971 WEST LUMSDEN RD SUITE 340 BRANDON, FL 33511 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: PAUL C. COMINGORE

Electronic Signature of Registered Agent

# Authorized Person(s) Detail :

Title MGRS PEARSON. GLENN Name Address 1971 W LUMSDEN RD STE 340 City-State-Zip: BRANDON FL 33511

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

MGRS

6296291642CC

Certificate of Status Desired: Yes

02/22/2019 Date

02/22/2019 Date

#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT FILED Feb 22, 2019 Secretary of State