

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000200769

Entity Name: 1005 ESPLANADE LLC

Current Principal Place of Business:

400 NORTH FLAGLER DRIVE, D5
WEST PALM BEACH, FL 33401

Current Mailing Address:

P.O. BOX 366
ARDMORE, PA 19003 UN

FEI Number: 81-0704032

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAHM, LORAIN C
400 NORTH FLAGLER DRIVE, D5
WEST PALM BEACH, FL 33401 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 AMBR
Name RAHM, LORAIN C
Address 400 NORTH FLAGLER DRIVE, D5
City-State-Zip: WEST PALM BEACH FL 33401

Title MANAGER
Name CONWAY, THOMAS JOSEPH IV
Address P.O. BOX 366
City-State-Zip: ARDMORE 19003

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: THOMAS J. CONWAY IV, CPA

MANAGER

05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date