

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000204273

**Entity Name:** OAKS OFFICE CTR D-202 LLC

**Current Principal Place of Business:**

4310 SHERIDAN ST  
202  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

4310 SHERIDAN ST  
202  
HOLLYWOOD, FL 33021 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BURTON, ANDRE S  
4310 SHERIDAN ST  
202  
HOLLYWOOD, FL 33021 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 BURTON, ANDRE S  
Address 4310 SHERIDAN ST. #202  
City-State-Zip: HOLLYWOOD FL 33021

Title MGR  
Name BURTON, ELLEN  
Address 4310 SHERIDAN ST. #202  
City-State-Zip: HOLLYWOOD FL 33021

Title MGR  
Name BURTON, DAVID  
Address 4310 SHERIDAN ST. #202  
City-State-Zip: HOLLYWOOD FL 33021

Title MGR  
Name BURTON, MICHELLE  
Address 4310 SHERIDAN ST. #202  
City-State-Zip: HOLLYWOOD FL 33021

*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:** ANDRE S BURTON

MGR

04/21/2022

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date