

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000003239

Entity Name: 1800 W. UNIVERSITY AVENUE, L.L.C.**Current Principal Place of Business:**7290 COLLEGE PKWY STE 400
FORT MYERS, FL 33907**Current Mailing Address:**600 GILLAM ROAD
WILMINGTON, OH 45177 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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	DELUCA, DONALD R
Address	7290 COLLEGE PKWY STE 400
City-State-Zip:	FORT MYERS FL 33907

Title	ASSISTANT SECRETARY
Name	WADE, JEFFREY C
Address	600 GILLAM ROAD
City-State-Zip:	WILMINGTON OH 45177

Title	MGR
Name	HAUNGS, JEFFREY T
Address	7290 COLLEGE PKWY STE 400
City-State-Zip:	FORT MYERS FL 33907

Title	CFO
Name	SHROYER, MICHAEL
Address	600 GILLAM ROAD
City-State-Zip:	WILMINGTON OH 45177

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: JEFFREY C WADE

ASSISTANT SECRETARY 04/22/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date