

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000138064

**Entity Name:** AVALON FLORIDA, LLC

**Current Principal Place of Business:**

901 NORTH STATE STREET  
SYRACUSE, NY 13208

**Current Mailing Address:**

901 NORTH STATE STREET  
SYRACUSE, FL 13208 US

**FEI Number:** 81-3354559

**Certificate of Status Desired:** Yes

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

PARACORP INCORPORATED  
155 OFFICE PLAZA DRIVE  
1ST FLOOR  
TALLAHASSEE, FL 32301 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	Title	MGR
Name	MIDGLEY, JP	Name	THRALL, SHAWN
Address	901 NORTH STATE STREET	Address	901 NORTH STATE STREET
City-State-Zip:	SYRACUSE NY 13208	City-State-Zip:	SYRACUSE NY 13208

*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:** MIDGLEY, JP

**CEO**

**03/19/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date