

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000178459

**Entity Name:** 5205 OAK ISLAND, LLC

**Current Principal Place of Business:**

6413 PINECASTLE BLVD, UNIT #3  
ORLANDO, FL 32809

**Current Mailing Address:**

6413 PINECASTLE BLVD, UNIT #3  
ORLANDO, FL 32809 US

**FEI Number:** 81-4119549

**Certificate of Status Desired:** No

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

LOWMAN, WILLIAM R. JR., ESQ.  
SHUFFIELD, LOWMAN & WILSON, P.A.  
1000 LEGION PLACE, SUITE 1700  
ORLANDO, FL 32801 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:** WILLIAM R. LOWMAN, JR. ESQ.

04/11/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           COMINS, CHRISTOPHER M.  
Address        6413 PINECASTLE BLVD, UNIT #3  
City-State-Zip: ORLANDO FL 32809

*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:** CHRISTOPHER M. COMINS

MANAGER

04/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date