

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000180199

**Entity Name:** FC HIALEAH DEVELOPMENT, LLC

**Current Principal Place of Business:**

2199 PONCE DE LEON BLVD.  
SUITE 201  
CORAL GABLES, FL 33134

**FILED**  
**Apr 18, 2018**  
**Secretary of State**  
**CC3096964669**

**Current Mailing Address:**

P.O. BOX 3435  
WEST PALM BEACH, FL 33401

**FEI Number: 81-4198222**

**Certificate of Status Desired: No**

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD  
#221E  
PALM BEACH GARDENS, FL 33410 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            PRESIDENT  
Name            FANJUL, JOSE F. JR.  
Address        P.O. BOX 3435  
City-State-Zip: WEST PALM BEACH FL 33401

Title            SENIOR VICE PRESIDENT  
Name            BLOMQVIST, ERIK J.  
Address        P.O. BOX 3435  
City-State-Zip: WEST PALM BEACH FL 33401

Title            VP  
Name            PORRO, JUAN C.  
Address        P.O. BOX 3435  
City-State-Zip: WEST PALM BEACH FL 33401

Title            VP, ASSISTANT SECRETARY  
Name            ROSS, DANIEL D.  
Address        P.O. BOX 3435  
City-State-Zip: WEST PALM BEACH FL 33401

Title            VP, SECRETARY  
Name            TABERNILLA, ARMANDO A.  
Address        P.O. BOX 3435  
City-State-Zip: WEST PALM BEACH FL 33401

Title            VP, TAXATION  
Name            ZUKOWSKI, PHILIP M.  
Address        P.O. BOX 3435  
City-State-Zip: WEST PALM BEACH FL 33401

Title            MANAGER  
Name            FCI RESIDENTIAL CORPORATION  
Address        P.O. BOX 3435  
City-State-Zip: WEST PALM BEACH FL 33401

Title            AUTHORIZED MEMBER  
Name            FLORIDA CRYSTALS CORPORATION  
Address        P.O. BOX 3435  
City-State-Zip: WEST PALM BEACH FL 33401

**Continues on page 2**

*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: ARMANDO A. TABERNILLA**

**VICE PRESIDENT**

**04/18/2018**

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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title VP, FINANCE & TREASURER  
Name LONDONO, ALEJANDRO  
Address P.O. BOX 3435  
City-State-Zip: WEST PALM BEACH FL 33401