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: ALAN J. ROSE

Electronic Signature of Signing Authorized Person(s) Detail

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

Authorized Person(s) Detail :

Title	MGR	Title	AMBR	
Name	ROSE, ALAN J	Name	GUSTAFSON, JEFFREY	
Address	1475 ESTUARY TRL	Address	3641 SW COQUINA COVE WAY	
City-State-Zip:	DELRAY BEACH FL 33483	City-State-Zip:	PALM CITY FL 34990	

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000213262

Entity Name: FLORIDA RESIDENCE, LLC

Current Principal Place of Business:

7647 WEST 100TH PLACE SUITE D BRIDGEVIEW, IL 60544

Current Mailing Address:

7647 WEST 100TH PLACE SUITE D BRIDGEVIEW, IL 60544 US

FEI Number: 81-4594861

Name and Address of Current Registered Agent:

ROSE MANAGEMENT OFFICE, LLC 651 SANCTUARY DR. BOCA RATON, FL 33431 US

Date

Certificate of Status Desired: No

04/29/2020

4/29/2020