

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000217545

**Entity Name:** GELAFIO KELLY 319, LLC

**Current Principal Place of Business:**

12601 MASTIQUE BEACH BLVD  
1701  
FORT MYERS, FL 33908

**Current Mailing Address:**

12601 MASTIQUE BEACH BLVD  
1701  
FORT MYERS, FL 33908 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GELAFIO, FRANK R MGR  
12601 MASTIQUE BEACH BLVD  
1701  
FORT MYERS, FL 33908 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 GELAFIO, FRANK R  
Address 12601 MASTIQUE BEACH BLVD 1701  
City-State-Zip: FORT MYERS FL 33908

Title MGR  
Name GELAFIO, MARYLINDA  
Address 12601 MASTIQUE BEACH BLVD  
1701  
City-State-Zip: FORT MYERS FL 33908

*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:** FRANK R GELAFIO

MGR

01/27/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date