

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000221170

**Entity Name:** ALGE ASSOCIATES LLC

**Current Principal Place of Business:**

2161 PALM BEACH LAKES BLVD.  
SUITE 304  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

44 COCOANUT ROW T5  
PALM BEACH, FL 33480 US

**FEI Number:** 81-4634755

**Certificate of Status Desired:** No

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

TANNENBAUM, MICHAEL D  
2161 PALM BEACH LAKES BLVD.  
SUITE 304  
WEST PALM BEACH, FL 33409 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 VOYATZIS, GEORGE  
Address 2161 PALM BEACH LAKES BLVD.,  
SUITE 304  
City-State-Zip: WEST PALM BEACH FL 33409

Title MGR  
Name VOYATZIS, ALEXANDRA  
Address 2161 PALM BEACH LAKES BLVD.,  
SUITE 304  
City-State-Zip: WEST PALM BEACH FL 33409

Title AUTHORIZED REPRESENTATIVE  
Name MANUEL, ANITA E  
Address 44 COCOANUT ROW T5  
City-State-Zip: PALM BEACH FL 33480

*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:** ANITA E MANUEL

**AUTHORIZED  
REPRESENTATIVE**

**04/12/2018**

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

\_\_\_\_\_  
Date