

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000011808

**Entity Name:** SUNRISE APARTMENTS OF FLORIDA, LLC

**Current Principal Place of Business:**

511 DILSA LN.  
IMMOKALEE, FL 34142

**Current Mailing Address:**

P.O. BOX 703  
IMMOKALEE, FL 34143 US

**FEI Number: 81-5239236**

**Certificate of Status Desired: No**

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

RODRIGUEZ, SAUL  
511 DILSA LN.  
IMMOKALEE, FL 34142 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 RODRIGUEZ, SAUL  
Address P.O. BOX 703  
City-State-Zip: IMMOKALEE FL 34143

Title MGR  
Name RODRIGUEZ, J. SAMUEL  
Address 515 DILSA LN.  
City-State-Zip: IMMOKALEE FL 34142

Title MGR  
Name RODRIGUEZ, DIOMAR  
Address 502 DILSA LN.  
City-State-Zip: IMMOKALEE FL 34142

*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: SAUL RODRIGUEZ**

**MANAGER**

**03/08/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date