

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000046312

**Entity Name:** 545 LAKESIDE CIR, LLC

**Current Principal Place of Business:**

11352 W STATE ROAD 84  
#207  
DAVIE, FL 33325

**Current Mailing Address:**

11352 W STATE ROAD 84  
#207  
DAVIE, FL 33325 US

**FEI Number:** 82-4477654

**Certificate of Status Desired:** No

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

ESCALA, CARMEN  
11352 W STATE ROAD 84  
#207  
DAVIE, FL 33325 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 ESCALA, CARMEN  
Address 11352 W STATE ROAD 84  
#207  
City-State-Zip: DAVIE FL 33325

Title AUTHORIZED REPRESENTATIVE  
Name ELLIS, EDWARD E.  
Address 11352 W STATE ROAD 84  
#207  
City-State-Zip: DAVIE FL 33325

*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:** CARMEN ESCALA

MGR

02/21/2018

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

\_\_\_\_\_  
Date