

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000102666

**Entity Name:** LONGWOOD 2017 LLC

**Current Principal Place of Business:**

1495 S.HIGHWAY 17-92  
LONGWOOD, FL 32750

**Current Mailing Address:**

1495 S.HIGHWAY 17-92  
LONGWOOD, FL 32750 SW

**FEI Number: 81-1485571**

**Certificate of Status Desired: No**

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

KHAN, MD J MR  
4560 PALMETTO AVE  
A & B  
WINTER PARK, FL 32792 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 KHAN, MD J  
Address 1495 S.HIGHWAY 17-92  
City-State-Zip: LONGWOOD 32750

*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: MD J KHAN** \_\_\_\_\_

**PRESIDENT**

**04/26/2019**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date