

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000243647

**Entity Name:** 42 CLUB HOUSE DRIVE #206, LLC**Current Principal Place of Business:**19 OCEAN DUNE CIRCLE  
PALM COAST, FL 32137**Current Mailing Address:**19 OCEAN DUNE CIRCLE  
PALM COAST, FL 32137**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PAVLOS, SHARON C  
19 OCEAN DUNE CIRCLE  
PALM COAST, FL 32137 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	PAVLOS, SHARON C
Address	19 OCEAN DUNE CIRCLE
City-State-Zip:	PALM COAST FL 32137

Title	MGR
Name	PAVLOS, JOHN
Address	19 OCEAN DUNE CIRCLE
City-State-Zip:	PALM COAST FL 32137

Title	MGR
Name	SYKES, JACLYN
Address	1301 SMILING FISH LANE
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	MGR
Name	SYKES, STEPHEN
Address	1301 SMILING FISH LANE
City-State-Zip:	ST. AUGUSTINE FL 32080

*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:** SHARON PAVLOS**MANAGER****02/18/2018**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date