

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000253692

**Entity Name:** 10926 BATAVIA DRIVE LLC

**Current Principal Place of Business:**

20C DELCARMINE STREET  
101  
WAKEFIELD, MA 01880

**Current Mailing Address:**

20C DELCARMINE STREET  
101  
WAKEFIELD, MA 01880

**FEI Number:** 82-3685424

**Certificate of Status Desired:** No

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

MANDELL, WILLIAM M  
10161 CENTURION PKWY N  
SUITE 160  
JACKSONVILLE, FL 32256 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 MANDELL, WILLIAM M  
Address 20C DELCARMINE STREET, STE 101  
City-State-Zip: WAKEFIELD MA 01880

Title MGR  
Name MANDELL, SCOTT  
Address 20C DELCARMINE ST, STE 101  
City-State-Zip: WAKEFIELD MA 01880

Title MGR  
Name CAFARELLA, THOMAS  
Address 20C DELCARMINE STREET, STE 101  
City-State-Zip: WAKEFIELD MA 01880

*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:** WILLIAM MANDELL

**MANAGER**

**03/09/2018**

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

\_\_\_\_\_  
Date