2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000059434

Entity Name: LAKE WORTH ROAD VILLAS, LLC

Current Principal Place of Business:

2199 PONCE DE LEON BLVD. SUITE 401 CORAL GABLES, FL 33134

Current Mailing Address:

P.O. BOX 3435 WEST PALM BEACH, FL 33401 US

FEI Number: 82-4857688

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 801 US HIGHWAY 1 NORTH PALM BEACH, FL 33408 US FILED Apr 25, 2022 Secretary of State 8222614910CC

Date

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

Authonizeu	reison(s) Delan.		
Title	PRESIDENT	Title	SENIOR VICE PRESIDENT
Name	FANJUL, JOSE F. JR.	Name	BLOMQVIST , ERIK J.
Address	1 NORTH CLEMATIS STREET SUITE 200	Address	1 NORTH CLEMATIS STREET SUITE 200
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401
Title	VP, FINANCE & TREASURER	Title	VP
Name	LONDONO, ALEJANDRO	Name	PORRO, JUAN C.
Address	1 NORTH CLEMATIS STREET SUITE 200	Address	1 NORTH CLEMATIS STREET SUITE 200
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401
Title	VICE PRESIDENT & SECRETARY	Title	VP, TAXATION
Name	TABERNILLA, ARMANDO A.	Name	ZUKOWSKI, PHILIP M.
Address	1 NORTH CLEMATIS STREET SUITE 200	Address	1 NORTH CLEMATIS STREET SUITE 200
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401
Title	MANAGER	Title	VICE PRESIDENT AND CHIEF ACCOUNTING OFFICER
Name	FCI RESIDENTIAL CORPORATION	Name	HENDI, MEHDI
Address	2199 PONCE DE LEON BLVD. SUITE 401	Address	1 NORTH CLEMATIS STREET SUITE 200
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	

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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: ARMANDO TABERNILLA

VICE PRESIDENT 04/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail Continued :

Title	ASSISTANT SECRETARY
Name	SADLER, BENJAMIN
Address	1 NORTH CLEMATIS STREET SUITE 200
City-State-Zip:	WEST PALM BEACH FL 33401