

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000115030

**Entity Name:** 230 PALMS OF GAINESVILLE, LLC

**Current Principal Place of Business:**

308 W UNIVERSITY AVENUE  
GAINESVILLE, FL 32601

**Current Mailing Address:**

308 W UNIVERSITY AVENUE  
GAINESVILLE, FL 32601 US

**FEI Number:** 82-5516860

**Certificate of Status Desired:** Yes

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

YOUNG, ADAM M  
308 W UNIVERSITY AVENUE  
GAINESVILLE, FL 32601 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            AMBR  
Name            YOUNG, ADAM  
Address        308 W UNIVERSITY AVENUE  
City-State-Zip: GAINESVILLE FL 32601

Title            CFO  
Name            JAMESON, TIMOTHY FRANCIS  
Address        308 W UNIVERSITY AVENUE  
City-State-Zip: GAINESVILLE FL 32601

*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:** TIMOTHY FRANCIS JAMESON

**CFO**

**01/03/2019**

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

\_\_\_\_\_  
Date