

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000161903

Entity Name: CENTERCORP PINES, LLC

Current Principal Place of Business:

600 LORING AVENUE
SALEM, MA 01970

Current Mailing Address:

600 LORING AVENUE
SALEM, MA 01970 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WURTENBERGER, KENNETH P
ONE WEST LAS OLAS BOULEVARD
SUITE 500
FORT LAUDERDALE, FL 33301 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 MANAGER
Name KLAMAN, MARK
Address 600 LORING AVENUE
City-State-Zip: SALEM MA 01970

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: MARK KLAMAN

MANAGER

04/16/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date