

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000198904

**Entity Name:** FERFELDT INVESTMENTS LLC

**Current Principal Place of Business:**

151 SAWGRASS CORNERS DR STE 202  
PONTE VEDRA, FL 32082

**Current Mailing Address:**

151 SAWGRASS CORNERS DR STE 202  
PONTE VEDRA, FL 32082 UN

**FEI Number:** 83-1646716

**Certificate of Status Desired:** No

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

THE FERBER COMPANY NORTH  
151 SAWGRASS CORNERS DR STE 202  
PONTE VEDRA, FL 32082 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:** PAUL S FERBER

01/29/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FERBER, PAUL S SR  
Address 151 SAWGRASS CORNERS DR STE 202  
City-State-Zip: PONTE VEDRA FL 32082

Title MGR  
Name FERBER, PAUL S JR  
Address 2655 NORTH OCEAN DR SUITE 401  
City-State-Zip: SINGER ISLAND FL 33404

Title MGR  
Name STEINFELDT, ERIC  
Address 194 MOUNT AIRY ROAD  
City-State-Zip: BASKING RIDGE NJ 07920

Title VP  
Name KLIPSTEIN, DAVID  
Address 194 MOUNT AIRY ROAD  
City-State-Zip: BASKING RIDGE NJ 07920

Title VP  
Name HOLLANDER, JUSTIN  
Address 194 MOUNT AIRY ROAD  
City-State-Zip: BASKING RIDGE NJ 07920

Title MGR  
Name GOSIK, KEEGAN  
Address 194 MOUNT AIRY ROAD  
City-State-Zip: BASKING RIDGE NJ 07920

Title MGR  
Name MESSING, STEVE  
Address 2655 NORTH OCEAN DRIVE SUITE 401  
City-State-Zip: SINGER ISLAND FL 33404

Title DRCS  
Name MURPHY JR, MICHAEL  
Address 151 SAWGRASS CORNERS DRIVE SUITE 202  
City-State-Zip: PONTE VEDRA BEACH FL 32082

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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:** PAUL S FERBER SR

MANAGER

01/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title DRCS  
Name LANG, JASON  
Address 151 SAWGRASS CORNERS DR STE 202  
City-State-Zip: PONTE VEDRA 32082