

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000243513

**Entity Name:** POINCIANA MANAGEMENT GROUP LLC**Current Principal Place of Business:**3740 PERCIVAL AVE  
MIAMI, FL 33133**Current Mailing Address:**3740 PERCIVAL AVE  
MIAMI, FL 33133 UN**FEI Number:** 83-2371422**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FERGUSON, ASA SR  
3740 PERCIVAL AVE  
MIAMI, FL 33133 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:** ASA FERGUSON SR.

04/30/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                      |
|-----------------|----------------------|
| Title           | CEO                  |
| Name            | FERGUSON, ASA SR     |
| Address         | 3740 PERCIVAL AVENUE |
| City-State-Zip: | MIAMI FL 33133       |

|                 |                      |
|-----------------|----------------------|
| Title           | MANAGER              |
| Name            | FERGUSON, INGRID     |
| Address         | 3740 PERCIVAL AVENUE |
| City-State-Zip: | MIAMI FL 33133       |

|                 |                   |
|-----------------|-------------------|
| Title           | AP                |
| Name            | UPSON, SHEILA     |
| Address         | 3740 PERCIVAL AVE |
| City-State-Zip: | MIAMI FL 33133    |

|                 |                   |
|-----------------|-------------------|
| Title           | DIR               |
| Name            | FERGUSON, ASA II  |
| Address         | 3740 PERCIVAL AVE |
| City-State-Zip: | MIAMI FL 33133    |

|                 |                       |
|-----------------|-----------------------|
| Title           | VP                    |
| Name            | FERGUSON, SAMANTHA A. |
| Address         | 3740 PERCIVAL AVENUE  |
| City-State-Zip: | MIAMI FL 33133        |

*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:** ASA FERGUSON

CEO

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date