

**2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L18000255325

**Entity Name:** 1725 WARES OPERATOR LLC

**Current Principal Place of Business:**

4700 6TH STREET SOUTH  
ARLINGTON, VA 22204

**Current Mailing Address:**

4700 6TH STREET SOUTH  
ARLINGTON, VA 22204 US

**FEI Number:** 83-2648405

**Certificate of Status Desired:** No

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

NEXT STEPS SENIOR SOLUTIONS LLC  
25536 NW 177TH LANE  
HIGH SPRINGS, FL 32643 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:** JEFFREY LINVILLE

12/09/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SCHROEDER, STEVEN F  
Address 4700 6TH STREET SOUTH  
City-State-Zip: ARLINGTON VA 22204

Title MANAGER  
Name LINVILLE, JEFFREY  
Address 25536 NW 177TH LANE  
City-State-Zip: HIGH SPRINGS FL 32643

*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:** STEVEN SCHROEDER

MGR

12/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date