

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000000807

**Entity Name:** 10905 LA SALINAS LLC

**Current Principal Place of Business:**

16361 VIA FONTANA  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

16361 VIA FONTANA  
DELRAY BEACH, FL 33484 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

COHN, ALAN B  
200 E BROWARD BLVD STE 1800  
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 MGR  
Name COHEN, GAIL BUTTERS  
Address 16361 VIA FONTANA  
City-State-Zip: DELRAY BEACH FL 33484

*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:** GAIL BUTTERS COHEN

MGR

02/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date