

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000024770

**Entity Name:** 5724 ASSOCIATES, LLC

**Current Principal Place of Business:**

2830 EAST ARAGON BLVD.  
#3  
SUNRISE, FL 33313

**Current Mailing Address:**

2830 EAST ARAGON BLVD.  
#3  
SUNRISE, FL 33313

**FEI Number:** 83-3854444

**Certificate of Status Desired:** No

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

MILLER, TREY E  
3101 NORTH FEDERAL HIGHWAY  
606  
FORT LAUDERDALE, FL 33306 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 JOHNSON, STANLEY  
Address 2830 EAST ARAGON BLVD., #3  
City-State-Zip: SUNRISE FL 33313

Title MGR  
Name PALAVICINI, ARGARITA  
Address 2830 EAST ARAGON BLVD., #3  
City-State-Zip: SUNRISE FL 33313

*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:** JOHNSON, STANLEY

**MANAGER**

**03/26/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date