

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000043090

**Entity Name:** THE PROPERTY PALS, L.L.C.

**Current Principal Place of Business:**

10700 NW 30TH PLACE  
APT. 4  
SUNRISE, FL 33322

**Current Mailing Address:**

10700 NW 30TH PLACE  
APT. 4  
SUNRISE, FL 33322 US

**FEI Number:** 84-4795881

**Certificate of Status Desired:** No

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

SCHAFFER, CHRISTINE A  
10700 NW 30TH PL  
APT. 4  
SUNRISE, FL 33322 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 AMBR  
Name PALUMBO, ELIZABETH A  
Address 10700 NW 30TH PL, APT. 4  
City-State-Zip: SUNRISE FL 33322

Title AMBR  
Name SCHAFFER, KAREN L  
Address 12291 NW 20TH CT  
City-State-Zip: PLANTATION FL 33323

Title AMBR  
Name SCHAFFER, CHRISTINE A  
Address 10700 NW 30TH PL, APT 4  
City-State-Zip: SUNRISE FL 33322

*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:** CHRISTINE A SCHAFFER

AMBR

02/16/2021

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

\_\_\_\_\_  
Date