

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000456699

Entity Name: ROSNER TRUST, LLC

Current Principal Place of Business:

12555 ORANGE DRIVE
SUITE 219
DAVIE, FL 33330

Current Mailing Address:

12555 ORANGE DRIVE
SUITE 219
DAVIE, FLORIDA 33330 UN

FEI Number: 87-3239397

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAW OFFICE OF MADELIN DIAZ, P.A.
12555 ORANGE DRIVE
SUITE 219
DAVIE, FL 33330 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	Title	AMBR
Name	NEGREIRO, MANUEL	Name	DIAZ, MADELIN
Address	12555 ORANGE DRIVE SUITE 219	Address	12555 ORANGE DRIVE SUITE 219
City-State-Zip:	DAVIE FL 33330	City-State-Zip:	DAVIE FL 33330
Title	MANAGER, AUTHORIZED MEMBER	Title	MGR
Name	MORGAN, JR., THOMAS J	Name	GALVAN, MAYDA DIAZ
Address	55 MERRICK WAY, SUITE 404	Address	8625 SW 120TH STREET
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	MIAMI FL 33156
Title	MGR	Title	MGR
Name	ROMANACH, JUAN	Name	BARO, ROBERT A
Address	9305 SW 117TH TERRACE	Address	7801 SW 90TH AVENUE
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33173
Title	MGR	Title	MGR
Name	ORTIZ-BARO, MIRIAM	Name	RAMOS, DIEGO
Address	7801 SW 90TH AVENUE	Address	2610 SW 21 TERRACE
City-State-Zip:	MIAMI FL 33173	City-State-Zip:	MIAMI FL 33145

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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: MADELIN DIAZ

MANAGING PARTNER

04/17/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	MGR	Title	MANAGER, MEMBER
Name	HERNANDEZ, MARK	Name	VIDAL, LEONARD
Address	PO BOX 558990	Address	495 BRICKELL AVENUE APARTMENT 2805
City-State-Zip:	MIAMI FL 33255	City-State-Zip:	MIAMI FL 33131