

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000002799

**Entity Name:** PORTFOLIO REAL ESTATE PALM BAY, LLC

**Current Principal Place of Business:**

2929 ARCH STM CIRE CENTRE  
17TH FLOOR  
PHILADELPHIA, PA 19104

**Current Mailing Address:**

2929 ARCH STM CIRE CENTRE  
17TH FLOOR  
PHILADELPHIA, PA 19104 US

**FEI Number:** 20-4624890

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
SUITE 4  
TALLAHASSEE, FL 32301 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 FRANKEL, MENASHE  
Address 2929 ARCH STM CIRE CENTRE  
17TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19104

Title MGR  
Name FRANKEL, YECHESKEL  
Address 2929 ARCH STM CIRE CENTRE  
17TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19104

Title MGR  
Name JACOBI, BRUCE  
Address 2929 ARCH STM CIRE CENTRE  
17TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19104

Title MGR  
Name DEVRIES, COLLEEN  
Address 2929 ARCH STM CIRE CENTRE  
17TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19104

*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:** BRUCE JACOBI

**MANAGER**

**04/12/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date