

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000007885

**Entity Name:** BRAVOFLORIDA, LLC**Current Principal Place of Business:**10002 PRINCESS PALM AVENUE,  
SUITE 106  
TAMPA, FL 33619**Current Mailing Address:**4220 EDISON LAKES PARKWAY  
SUITE 300  
MISHAWAKA, IN 46545 US**FEI Number:** 47-5144981**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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	CEO
Name	FITZPATRICK, DANIEL B
Address	4220 EDISON LAKES PARKWAY SUITE 300
City-State-Zip:	MISHAWAKA IN 46545

Title	VP, PLANNING
Name	FITZPATRICK, DANIEL J
Address	4220 EDISON LAKES PARKWAY SUITE 300
City-State-Zip:	MISHAWAKA IN 46545

Title	P
Name	FIRTH, JOHN C
Address	4220 EDISON LAKES PARKWAY SUITE 300
City-State-Zip:	MISHAWAKA IN 46545

  

Title	VP, REAL ESTATE AND DEVELOPMENT
Name	TYLER, JENNIFER
Address	3018 US HIGHWAY 301 N. SUITE 100
City-State-Zip:	TAMPA FL 33619

*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:** JOHN C FIRTH**PRESIDENT****02/02/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date