

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000052360

**FILED  
Mar 12, 2019  
Secretary of State  
1269646608CC**

**Entity Name:** LUDOVICI BUILDING THREE, INC.

**Current Principal Place of Business:**

9000 SW 152 STREET, SUITE 106  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

9000 SW 152 STREET, SUITE 106  
PALMETTO BAY, FL 33157

**FEI Number:** 20-4684134

**Certificate of Status Desired:** No

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

LUDOVICI, EDWARD P  
9000 SW 152 STREET, SUITE 106  
PALMETTO BAY, FL 33157 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

**Officer/Director Detail :**

Title           DPS  
Name           LUDOVICI, EDWARD P  
Address        9000 SW 152 STREET, SUITE 106  
City-State-Zip: PALMETTO BAY FL 33157

Title           DT  
Name           LUDOVICI, BARBARA A  
Address        9000 SW 152 STREET, SUITE 106  
City-State-Zip: PALMETTO BAY FL 33157

Title           DAT  
Name           LUDOVICI, SUSAN M  
Address        9000 SW 152 STREET, SUITE 106  
City-State-Zip: PALMETTO BAY FL 33157

Title           D1V  
Name           LUDOVICI, JOSEPH P  
Address        9000 SW 152 STREET, SUITE 106  
City-State-Zip: PALMETTO BAY FL 33157

Title           D2V  
Name           LUDOVICI, LORENA H  
Address        9000 SW 152 STREET, SUITE 106  
City-State-Zip: PALMETTO BAY FL 33157

Title           D3V  
Name           LUDOVICI, STEPHEN E  
Address        9000 SW 152 STREET, SUITE 106  
City-State-Zip: PALMETTO BAY FL 33157

Title           D4V  
Name           LUDOVICI, CHRISTINA S  
Address        9000 SW 152 STREET, SUITE 106  
City-State-Zip: PALMETTO BAY FL 33157

Title           D5V  
Name           LUDOVICI, ALEXIS N  
Address        9000 SW 152 STREET, SUITE 106  
City-State-Zip: PALMETTO BAY FL 33157

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: EDWARD P LUDOVICI**

**PRESIDENT**

**03/12/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date