

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000032846

**Entity Name:** LUDOVICI BUILDING FIVE, 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:** 20-8688148

**Certificate of Status Desired:** No

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

LUDOVICI PROPERTIES, INC.  
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:** EDWARD P. LUDOVICI

04/05/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

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

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

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

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

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

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

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

**Continues on page 2**

*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

04/05/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

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