## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000005444

Entity Name: 4685 PONCE DE LEON LLC

**Current Principal Place of Business:** 

4685 PONCE DE LEON BLVD. CORAL GABLES, FL 33146

## **Current Mailing Address:**

4685 PONCE DE LEON BLVD. CORAL GABLES, FL 33146

FEI Number: 04-3663235 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SACHER, CHARLES P 2655 LEJEUNE ROAD, SUITE 1101 CORAL GABLES, FL 33134 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

FILED Apr 09, 2013

**Secretary of State** 

CC1545095663

## Authorized Person(s) Detail:

Title MGR

Name VOIGT, CAROLYN

Address 4685 PONCE DE LEON BLVD.

City-State-Zip: CORAL GABLES FL 33146

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROLYN VOIGT MAN.

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER 04/09/2013

Date