## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054275

Entity Name: TOWN CENTER AT ST. JOHNS, LLC

**Current Principal Place of Business:** 

6525 3RD STREET, #409 ROCKLEDGE, FL 32955

**Current Mailing Address:** 

6525 3RD STREET, #409 ROCKLEDGE, FL 32955 US

FEI Number: 20-1452687 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOHRR, PHILIP FESQ. 1800 W. HIBISCUS BLVD. SUITE 138 MELBOURNE, FL 32901 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 Jan 10, 2018

**Secretary of State** 

CC2487118722

Authorized Person(s) Detail:

Title MGRM Title P

Name KODSI, ROBERT Name KODSI, MAURICE

Address 6525 3RD STREET, #409 Address 6525 3RD STREET, #409
City-State-Zip: ROCKLEDGE FL 32955 City-State-Zip: ROCKLEDGE FL 32955

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: ROBERT KODSI MGRM