

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044026

Entity Name: 5625 MACDONALD, LLC

Current Principal Place of Business:

5625 MACDONALD AVENUE
KEY WEST, FL 33040

Current Mailing Address:

PO BOX 1527
KEY WEST, FL 33041

FEI Number: 26-0308804

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSSI, MARK
24 HILTON HAVEN DRIVE
KEY WEST, FL 33040 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 MGR
Name ROSSI FAMILY LIMITED PARTNERSHIP
Address P.O. BOX 1527
City-State-Zip: KEY WEST FL 33041

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: MARK ROSSI

MANAGEMENT

04/26/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date