

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000064503

**Entity Name:** ST. THOMAS DEVELOPMENT COMPANY, L.L.C.

**Current Principal Place of Business:**

1301 WALKER DRIVE  
BAKER, FL 32531

**Current Mailing Address:**

1301 WALKER DRIVE  
BAKER, FL 32531 US

**FEI Number:** 20-3173454

**Certificate of Status Desired:** Yes

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

ENGEL, NORBERT W  
1301 WALKER DRIVE  
BAKER, FL 32531 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 MGRM  
Name ENGEL, SEBASTIAN E  
Address CORINTHSTRASSE 52  
City-State-Zip: BERLIN BERLIN 10245

Title MGRM  
Name ENGEL, JANETTE F  
Address 1301 WALKER DRIVE  
City-State-Zip: BAKER FL 32531

Title MGRM  
Name ENGEL, NORBERT W  
Address 1301 WALKER DRIVE  
City-State-Zip: BAKER FL 32531

Title AUTHORIZED MEMBER  
Name ENGEL, JEREMY DAVID  
Address GLOGAUERSTRASSE #26  
City-State-Zip: BERLIN 10999

Title AUTHORIZED MEMBER  
Name ENGEL, CHRISTOPHER NORBERT  
Address GLOGAUERSTRASSE #26  
City-State-Zip: BERLIN 10999

*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:** NORBERT W. ENGEL

**MGR.**

**04/15/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date