# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L05000079065

Entity Name: 216 GABRILOVE, LLC

#### **Current Principal Place of Business:**

4 MOSS POINT DRIVE ORMOND BEACH, FL 32174

# **Current Mailing Address:**

4 MOSS POINT DRIVE ORMOND BEACH, FL 32174 US

## FEI Number: 20-3286801

### Name and Address of Current Registered Agent:

GABRILOVE, STEPHEN H 4 MOSS POINT DRIVE ORMOND BEACH, FL 32174 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

## Authorized Person(s) Detail :

Title	MGRM
Name	GABRILOVE, STEPHEN H
Address	4 MOSS POINT DRIVE
City-State-Zip:	ORMOND BEACH FL 32174

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: STEPHEN H GABRILOVE

MGRM

01/13/2018 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 13, 2018 Secretary of State CC0164285493

Certificate of Status Desired: No

Date