

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000087497

Entity Name: MAGUIRE 50 WEST, LLC

Current Principal Place of Business:

7586 WEST SAND LAKE ROAD
ORLANDO, FL 32819

Current Mailing Address:

7586 WEST SAND LAKE ROAD
ORLANDO, FL 32819 US

FEI Number: 06-1760671

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYD, SCOTT T
7586 WEST SAND LAKE ROAD
ORLANDO, FL 32819 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 BOYD, SCOTT T
Address 7586 W SAND LAKE RD
City-State-Zip: ORLANDO FL 32819

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: SCOTT T BOYD

MGR

04/06/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date