

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000088870

**Entity Name:** STILES GAINESVILLE GP, LLC

**Current Principal Place of Business:**

201 E LAS OLAS BLVD  
12TH FLR  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

201 E LAS OLAS BLVD  
12TH FLR  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 38-4183829

**Certificate of Status Desired:** No

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

DEUTSCH, STEVEN W ESQ.  
1875 NW CORPORATE BLVD.  
SUITE 100  
BOCA RATON, FL 33431 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:** THOMAS M. BLUTH

02/01/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name STILES, KENNETH L  
Address 201 E LAS OLAS BLVD  
12TH FLR  
City-State-Zip: FORT LAUDERDALE FL 33301

Title P  
Name STILES, KENNETH L  
Address 201 E LAS OLAS BLVD  
12TH FLR  
City-State-Zip: FORT LAUDERDALE FL 33301

Title VST  
Name BLUTH, THOMAS M  
Address 201 E LAS OLAS BLVD  
12TH FLR  
City-State-Zip: FORT LAUDERDALE FL 33301

Title V  
Name ESPOSITO, ROBERT  
Address 201 E LAS OLAS BLVD  
12TH FLR  
City-State-Zip: FORT LAUDERDALE FL 33301

*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:** KENNETH L. STILES

MGR

02/01/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date