## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000007729

Entity Name: GARDENS AT DRIFTWOOD LLC

**Current Principal Place of Business:** 

120 FORBES BLVD SUITE 180

MANSFIELD, MA 02048-1150

**Current Mailing Address:** 

120 FORBES BLVD **SUITE 180** 

MANSFIELD, MA 02048-1150 US

FEI Number: 45-3231523 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCDONOUGH, BRIAN J ESQ. 2200 MUSEMUN TOWER 150 WEST FLAGLER STREET MIAMI, FL 33130 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: BRIAN J MCDONOUGH 01/13/2014

> Date Electronic Signature of Registered Agent

> > Title

Authorized Person(s) Detail:

Title Title **MGRM** MGR

Name THE GATEHOUSE GROUP, INC. Name CANEPARI, DAVID J

120 FORBES BLVD SUITE 180 120 FORBES BLVD SUITE 180 Address Address City-State-Zip: MANSFIELD MA 02048-1150 City-State-Zip: MANSFIELD MA 02048-1150

AUTHORIZED REPRESENTATIVE Title MGRM Title

Name HAMPTON, SARITA D PLONSKIER, MARC S Name Address 120 FORBES BLVD 120 FORBES BLVD SUITE 180 Address

SUITE 180 City-State-Zip: MANSFIELD MA 02048-1150

City-State-Zip: MANSFIELD MA 02048-1150

**AUTHORIZED REPRESENTATIVE** Title Title AUTHORIZED REPRESENTATIVE Name YORKSHAITIS, ROGER

Name INAMDAR, NIKUL A Address 120 FORBES BLVD

Address 445 N.W. 4TH STREET SUITE 180 SUITE 108

MANSFIELD MA 02048-1150 City-State-Zip: City-State-Zip: MIAMI FL 33128-1701

Title AUTHORIZED REPRESENTATIVE

AUTHORIZED REPRESENTATIVE MCMILLIN, BRIAN J Name Name LEO, JENNIFER S

120 FORBES BLVD Address Address 120 FORBES BLVD **SUITE 180** 

**SUITE 180** MANSFIELD MA 02048-1150

City-State-Zip: MANSFIELD MA 02048-1150 City-State-Zip:

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.

01/13/2014 SIGNATURE: MARC S PLONSKIER **MGRM** 

**FILED** Jan 13, 2014

Secretary of State

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