

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000031883

**Entity Name:** BSL RESIDENTIAL, LLC

**Current Principal Place of Business:**

32 SOUTH OSPREY AVENUE  
SUITE 102  
SARASOTA, FL 34236

**Current Mailing Address:**

32 SOUTH OSPREY AVENUE  
SUITE 102  
SARASOTA, FL 34236 US

**FEI Number:** 20-8704222

**Certificate of Status Desired:** No

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

KORN, TYLER BESQ  
5150 TAMiami TRAIL N  
SUITE 302  
NAPLES, FL 34103 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           MANAGER  
Name           CANDLER, ASA WIII  
Address        32 SOUTH OSPREY AVENUE  
                  SUITE 102  
City-State-Zip: SARASOTA FL 34236

Title           MANAGER  
Name           OSTERMANN, STEPHEN J  
Address        32 SOUTH OSPREY AVENUE  
                  SUITE 102  
City-State-Zip: SARASOTA FL 34236

Title           MANAGER  
Name           JASSY, JOHN  
Address        903 ANCHORAGE ROAD  
City-State-Zip: TAMPA FL 33602

*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 OSTERMANN

**MANAGER**

**03/27/2018**

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

\_\_\_\_\_  
Date