

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000100065

Entity Name: EMPLOYER'S ALLIANCE VII, LLC**Current Principal Place of Business:**2054 VISTA PARKWAY
SUITE 300
WEST PALM BEACH, FL 33411**Current Mailing Address:**2054 VISTA PARKWAY
SUITE 300
WEST PALM BEACH, FL 33411 US**FEI Number:** 26-1740285**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE CT CORPORATION
1200 SOUTH PINE ISLAND ROAD
STE 250
PLANTATION, FL 33324 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:** MICHELLE HEMPHILL

03/02/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title TREASURER
Name SCHRADER, ROBERT L
Address 2054 VISTA PARKWAY
 SUITE 300
City-State-Zip: WEST PALM BEACH FL 33411

Title DIRECTOR, MANAGER, VP
Name GIBSON, JOHN JR.
Address 2054 VISTA PARKWAY
 SUITE 300
City-State-Zip: WEST PALM BEACH FL 33411

Title SECRETARY
Name SCHAEFFER, STEPHANIE
Address 2054 VISTA PARKWAY
 SUITE 300
City-State-Zip: WEST PALM BEACH FL 33411

Title PRESIDENT
Name SUKALSKI, TERRANCE
Address 2054 VISTA PARKWAY
 SUITE 300
City-State-Zip: WEST PALM BEACH FL 33411

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: JOHN GIBSON, JR.,**MANAGER**

03/02/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date