

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000066226

Entity Name: REALVEST EQUITY PARTNERS, LLC**Current Principal Place of Business:**1800 PEMBROOK DRIVE
SUITE 350
ORLANDO, FL 32810**Current Mailing Address:**1800 PEMBROOK DRIVE
SUITE 350
ORLANDO, FL 32810 US**FEI Number:** 80-0218033**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAHONEY, PATRICK J
1800 PEMBROOK DRIVE
SUITE 350
ORLANDO, FL 32810 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 PARTYKA, PAUL P
Address 1800 PEMBROOK DRIVE
SUITE 350
City-State-Zip: ORLANDO FL 32810

Title MANAGER
Name O'CONNOR, EDWARD KEVIN
Address 1800 PEMBROOK DRIVE
SUITE 350
City-State-Zip: ORLANDO FL 32810

Title MANAGER
Name HEIDRICH, MICHAEL F
Address 1800 PEMBROOK DRIVE
SUITE 350
City-State-Zip: ORLANDO FL 32810

Title MANAGER
Name MAHONEY, PATRICK J
Address 1800 PEMBROOK DRIVE
SUITE 350
City-State-Zip: ORLANDO FL 32810

Title MANAGER
Name WEBB, ROBIN L
Address 1800 PEMBROOK DRIVE
SUITE 350
City-State-Zip: ORLANDO FL 32810

Title MANAGER
Name VIELE, GEORGE J
Address 1800 PEMBROOK DRIVE
SUITE 350
City-State-Zip: ORLANDO FL 32810

Title MANAGER
Name HANKINS, THOMAS E
Address 1800 PEMBROOK DRIVE
SUITE 350
City-State-Zip: ORLANDO FL 32810

Title MANAGER
Name MALOLOS, VERONICA
Address 1800 PEMBROOK DRIVE
SUITE 350
City-State-Zip: ORLANDO FL 32810

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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: PATRICK MAHONEY

MANAGER

04/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	MANAGER
Name	LICHTIGMAN, CHARLES S.
Address	1800 PEMBROOK DRIVE SUITE 350
City-State-Zip:	ORLANDO FL 32810