

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000044012

Entity Name: NDRE DR, LLC

Current Principal Place of Business:

3801 PGA BOULEVARD
SUITE 565
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

3801 PGA BOULEVARD
SUITE 565
PALM BEACH GARDENS, FL 33410 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NASON, YEAGER, GERSON, HARRIS & FUMERO, P.A
3001 PGA BOULEVARD
SUITE 305
PALM BEACH GARDENS, FL 33410 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 PRESIDENT
Name STRINGER, PAUL T
Address 3801 PGA BOULEVARD
 SUITE 565
City-State-Zip: PALM BEACH GARDENS FL 33410

Title VP
Name BALL, RAYMOND E.
Address 3801 PGA BOULEVARD
 SUITE 565
City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY
Name SCHNARE, JAMES H II
Address 3801 PGA BOULEVARD
 SUITE 565
City-State-Zip: PALM BEACH GARDENS FL 33410

Title TREASURER
Name COSTANTINO, ELEANOR J.
Address 3801 PGA BOULEVARD
 SUITE 565
City-State-Zip: PALM BEACH GARDENS FL 33410

Title ASST. SECRETARY
Name JAFFE, AMY
Address 3801 PGA BOULEVARD
 SUITE 565
City-State-Zip: PALM BEACH GARDENS FL 33410

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: AMY JAFFE

ASST. SECRETARY

04/14/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date