

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000044012

Entity Name: NDRE DR, LLC

Current Principal Place of Business:

11780 U.S. HIGHWAY ONE, 5TH FL
NORTH PALM BEACH, FL 33408

Current Mailing Address:

11780 U.S. HIGHWAY ONE, 5TH FL
NORTH PALM BEACH, FL 33408

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAILE,SHAW & PFAFFENBERGER, P.A.
660 U.S. HIGHWAY ONE, 3RD FLOOR
NORTH PALM BEACH, FL 33408 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 P
Name NICKLAUS, JACK WII
Address 11780 U.S. HIGHWAY ONE, SUITE 500
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP
Name BALL, RAYMOND
Address 11780 U.S. HIGHWAY ONE, SUITE 500
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP
Name SCHNARE, JAMES HII
Address 11780 U.S. HIGHWAY ONE, SUITE 500
City-State-Zip: NORTH PALM BEACH FL 33408

Title S
Name DOTY, DONNA L
Address 11780 U.S. HIGHWAY ONE, SUITE 500
City-State-Zip: NORTH PALM BEACH FL 33408

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: DONNA L. DOTY

SECRETARY

04/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date