

**2015 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**

**04/24/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date