

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000084526

Entity Name: GAVESON COURT, LLC**Current Principal Place of Business:**14137 ISLAMORADA DRIVE
ORLANDO, FL 32837**Current Mailing Address:**14137 ISLAMORADA DRIVE
ORLANDO, FL 32837 US**FEI Number:** 27-0842240**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TAMBERRINO, SUZANNE S
14137 ISLAMORADA DRIVE
ORLANDO, FL 32837 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	MGRM
Name	TAMBERRINO, SUZANNE S
Address	14137 ISLAMORADA DRIVE
City-State-Zip:	ORLANDO FL 32837

Title	MR
Name	TAMBERRINO, NICHOLAS A
Address	14137 ISLAMORADA DRIVE
City-State-Zip:	ORLANDO FL 32837

Title	MR
Name	SCHLOSSBERG, STEVEN AND KIM
Address	100 EAST GRANADA BLVD.
City-State-Zip:	ORMOND BEACH FL 32176

Title	MS
Name	HART, STEPHANIE
Address	120 WILDERNESS TRAIL
City-State-Zip:	CRESCENT CITY FL 32112

Title	MR
Name	SCHLOSSBERG, SCOTT&SHELLEY
Address	16021 E LOST HILLS DRIVE
City-State-Zip:	FOUNTAIN HILLS AZ 85268

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: SUZANNE S TAMBERRINO**MANAGING MEMBER****02/01/2019**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date