

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000092841

**Entity Name:** VERSA PROPERTY MANAGEMENT, LLC

**Current Principal Place of Business:**

661 UNIVERSITY BLVD  
STE 200  
JUPITER, FL 33458

**Current Mailing Address:**

661 UNIVERSITY BLVD  
STE 200  
JUPITER, FL 33458

**FEI Number:** 27-1011213

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REGSERV CORP.  
661 UNIVERSITY BLVD  
STE 200  
JUPITER, FL 33458 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 CHAIRMAN, CHIEF EXECUTIVE OFFICER  
Name RENDINA, RICHARD M  
Address 661 UNIVERSITY BLVD STE 200  
City-State-Zip: JUPITER FL 33458

Title VP, SECRETARY  
Name RENDINA, MICHAEL D  
Address 661 UNIVERSITY BLVD STE 200  
City-State-Zip: JUPITER FL 33458

Title VICE PRESIDENT  
Name RENDINA, DAVID B.  
Address 661 UNIVERSITY BLVD STE 200  
City-State-Zip: JUPITER FL 33458

Title AUTHORIZED MEMBER  
Name VERSA MM, LLC  
Address 661 UNIVERSITY BLVD STE 200  
City-State-Zip: JUPITER FL 33458

Title P, CFO  
Name FLORES, BENNY  
Address 661 UNIVERSITY BLVD STE 200  
City-State-Zip: JUPITER FL 33458

Title CHIEF OPERATING OFFICER  
Name CICH, BRIAN C  
Address 661 UNIVERSITY BLVD STE 200  
City-State-Zip: JUPITER FL 33458

*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:** RICHARD M RENDINA

**CEO**

**04/04/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date