

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000131128

**Entity Name:** HOUSING BY OWNER LLC

**Current Principal Place of Business:**

5267 LONESOME DOVE DRIVE  
KISSIMMEE, FL 34746

**Current Mailing Address:**

P.O. BOX 771723  
ORLANDO, FL 32877 US

**FEI Number:** 27-4463993

**Certificate of Status Desired:** No

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

OLIVERI, GIUSEPPE  
5267 LONESOME DOVE DRIVE  
KISSIMMEE, FL 34746 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	Title	MGRM
Name	GIUSEPPE, OLIVERI	Name	SABRINA, PALLOCCA
Address	P.O. BOX 771723	Address	P.O. BOX 771723
City-State-Zip:	ORLANDO FL 32877	City-State-Zip:	ORLANDO FL 32877

*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:** GIUSEPPE OLIVERI

**MGRM**

**02/17/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date