## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000016572

**Entity Name: VINEYARD GP LLC** 

**Current Principal Place of Business:** 

120 FORBES BOULEVARD

SUITE 180

MANSFIELD, MA 02048

**Current Mailing Address:** 

120 FORBES BOULEVARD SUITE 180

MANSFIELD, MA 02048 US

FEI Number: 27-4861849 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOVELL, TERRY M 2200 MUSEUM TOWER 150 W. FLAGLER STREET MIAMI, FL 33130 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

**FILED** Jan 11, 2017

**Secretary of State** 

CC0578002647

Authorized Person(s) Detail:

Title MANAGER Title AUTHORIZED MEMBER Name THE GATEHOUSE GROUP, INC. Name PLONSKIER, MARC S

120 FORBES BOULEVARD 120 FORBES BOULEVARD Address Address

SUITE 180 **SUITE 180** 

City-State-Zip: MANSFIELD MA 02048 City-State-Zip: MANSFIELD MA 02048

Title **AUTHORIZED MEMBER** Title AUTHORIZED REPRESENTATIVE

Name CANEPARI, DAVID J Name YORKSHAITIS, ROGER

Address 120 FORBES BOULEVARD Address 120 FORBES BOULEVARD

> SUITE 180 **SUITE 180**

City-State-Zip: MANSFIELD MA 02048 City-State-Zip: MANSFIELD MA 02048

Title **AUTHORIZED REPRESENTATIVE** Title **AUTHORIZED REPRESENTATIVE** 

LEONARDO, CHRISTOPHER INAMDAR, NIKUL A Name Name

120 FORBES BOULEVARD 445 NW 4TH STREET Address Address SUITE 108

SUITE 180

City-State-Zip: MANSFIELD MA 02048 City-State-Zip: MIAMI FL 33128-1701

**AUTHORIZED REPRESENTATIVE** AUTHORIZED REPRESENTATIVE Title Title

Name HAMPTON, SARITA D Name LEO. JENNIFER S

Address 120 FORBES BOULEVARD Address 120 FORBES BOULEVARD

> **SUITE 180 SUITE 180**

MANSFIELD MA 02048 MANSFIELD MA 02048 City-State-Zip: City-State-Zip:

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: MARC S PLONSKIER

PRESIDENT OF THE MANAGER

01/11/2017