

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000069282

**Entity Name:** DAVIE'S LAST FRONTIER LLC

**Current Principal Place of Business:**

5140 DAVIE RD.  
DAVIE, FL 33314

**Current Mailing Address:**

5140 DAVIE RD.  
DAVIE, FL 33314 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BRICKMAN, RICHARD  
3510 NW 89 TERR  
COOPER CITY, FL 33024 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 BRICKMAN, RICHARD  
Address 5140 DAVIE RD.  
City-State-Zip: DAVIE FL 33024

Title MGRM  
Name BRICKMAN, LINDA  
Address 5140 DAVIE RD.  
City-State-Zip: DAVIE FL 33024

Title MGRM  
Name MCGLINCHEY, JENNIFER B  
Address 5140 DAVIE RD.  
City-State-Zip: DAVIE FL 33024

Title MGRM  
Name MCGLINCHEY, SEAMUS  
Address 5140 DAVIE RD.  
City-State-Zip: DAVIE FL 33024

*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 BRICKMAN

**PRESIDENT**

**01/16/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date