## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000074983

Entity Name: FLAGLER DEVELOPMENT COMPANY, LLC

nuty Name. FLAGLER DEVELOPMENT COMPAINT,

## **Current Principal Place of Business:**

700 NW 1ST AVENUE SUITE 1620 MIAMI, FL 33136

## **Current Mailing Address:**

700 NW 1ST AVENUE SUITE 1620 MIAMI, FL 33136 US

FEI Number: 30-0564028 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COBB, KOLLEEN O.P. 700 NW 1ST AVENUE SUITE 1620 MIAMI, FL 33136 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: KOLLEEN O.P. COBB 04/07/2021

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail :

Title MGR Title MGR

Name NARDONE, RANDAL A Name ADAMS, JOSEPH

Address 700 NW 1ST AVENUE Address 700 NW 1ST AVENUE

SUITE 1620 SUITE 1620

City-State-Zip: MIAMI FL 33136 City-State-Zip: MIAMI FL 33136

Title MGR Title VP, SECRETARY

Name TSERPELIS, DEMETRIOS Name COBB, KOLLEEN O.P.

Address 700 NW 1ST AVENUE Address 700 NW 1ST AVENUE

SUITE 1620 SUITE 1620

City-State-Zip: MIAMI FL 33136 City-State-Zip: MIAMI FL 33136

Title VP, ASST. SECRETARY, TREASURER Title VP

Name GODOY, JUAN Name ANDERSON, MAURICIO H

Address 700 NW 1ST AVENUE Address 700 NW 1ST AVENUE

SUITE 1620 SUITE 1620

City-State-Zip: MIAMI FL 33136 City-State-Zip: MIAMI FL 33136

FILED Apr 07, 2021

**Secretary of State** 

0640844114CC

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.