

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000037507

**Entity Name:** ROMORA BAY INVESTORS, LLC

**Current Principal Place of Business:**

8750 NW 36 STREET  
SUITE 475  
DORAL, FL 33178

**FILED**  
**Feb 14, 2020**  
**Secretary of State**  
**7488117338CC**

**Current Mailing Address:**

8750 NW 36 STREET  
SUITE 475  
DORAL, FL 33178 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

CF REGISTERED AGENT INC.  
100 S. ASHLEY DRIVE  
SUITE 400  
TAMPA, FL 33602 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: BY: BRIAN A. HART, AUTHORIZED REPRESENTATIVE**

**02/14/2020**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CLARKE, MERCER K  
Address 799 BRICKELL PLAZA  
SUITE 900  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name DICKINSON, ROBERT  
Address 799 BRICKELL PLAZA  
SUITE 900  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name POWELL, EARL W  
Address 550 SO. DIXIE HWY  
City-State-Zip: MIAMI FL 33146

Title MGRM  
Name PARAMENTER, DARRYL  
Address 8750 NW 36 STREET  
SUITE 475  
City-State-Zip: DORAL FL 33178

Title MGRM  
Name DAVIDSON, JOHN C  
Address 3399 PEACHTREE ROAD  
SUITE 300  
City-State-Zip: ATLANTA GA 30326

*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: JOHN DAVIDSON**

**MGRM**

**02/14/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date