

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000142644

**FILED**  
**Mar 14, 2017**  
**Secretary of State**  
**CC4972392824**

**Entity Name:** TAMAYA PROPERTY HOLDINGS, LLC

**Current Principal Place of Business:**

2379 BEVILLE ROAD  
DAYTONA BEACH, FL 32119

**Current Mailing Address:**

2379 BEVILLE ROAD  
DAYTONA BEACH, FL 32119 US

**FEI Number:** 46-1499399

**Certificate of Status Desired:** No

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

HAGAN, J. ANDREW ESQ.  
2379 BEVILLE ROAD  
DAYTONA BEACH, FL 32119 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:** J. ANDREW HAGAN

03/14/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGING MEMBER  
Name HC TAMAYA HOLDINGS, LLC  
Address 2379 BEVILLE ROAD  
City-State-Zip: DAYTONA BEACH FL 32119

Title PRESIDENT, SECRETARY,  
TREASURER  
Name HOSSEINI-KARGAR, MORTEZA  
Address 2379 BEVILLE ROAD  
City-State-Zip: DAYTONA BEACH FL 32119

Title VP  
Name CARR, JAMES  
Address 135 SAN LORENZO BLVD.  
City-State-Zip: CORAL GABLES FL 33146

Title VP  
Name GRAGG, K. LAWRENCE  
Address 135 SAN LORENZO AVENUE  
SUITE 750  
City-State-Zip: CORAL GABLES FL 33146

Title VP  
Name HAAS, DAVID  
Address 2379 BEVILLE ROAD  
City-State-Zip: DAYTONA BEACH FL 32119

Title VP  
Name IRLAND, CHARLENE B.  
Address 2379 BEVILLE ROAD  
City-State-Zip: DAYTONA BEACH FL 32119

Title VP  
Name MCCARRICK, KELLY  
Address 2379 BEVILLE ROAD  
City-State-Zip: DAYTONA BEACH FL 32119

Title ASSISTANT VICE PRESIDENT  
Name NEWKIRK, KIMBERLY A.  
Address 2379 BEVILLE ROAD  
City-State-Zip: DAYTONA BEACH FL 32119

*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:** MORTEZA HOSSEINI-KARGAR

**PRESIDENT**

03/14/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date