

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000158477

**Entity Name:** 1551 PALM LLC

**Current Principal Place of Business:**

5085 CHARLEMAGNE ROAD  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

5085 CHARLEMAGNE ROAD  
JACKSONVILLE, FL 32210 US

**FEI Number:** 46-1600528

**Certificate of Status Desired:** No

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

CONTEGA BUSINESS SERVICES LLC  
ONE INDEPENDENT DRIVE STE 1200  
JACKSONVILLE, FL 32202 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           MANAGER  
Name           BROCKMAN, BERNARD RUSSELL  
Address        5085 CHARLEMAGNE ROAD  
City-State-Zip: JACKSONVILLE FL 32210

Title           MANAGER  
Name           BROCKMAN, ASHLEY TAYLOR  
Address        5085 CHARLEMAGNE ROAD  
City-State-Zip: JACKSONVILLE FL 32210

*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:** BERNARD RUSSELL BROCKMAN

MANAGER

04/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date