# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000163707

Entity Name: PARKSIDE VILLAS DESOTO, LLC

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

13650 FIDDLESTICKS BLVD BOX202-387 FORT MYERS, FL 33912

# **Current Mailing Address:**

13650 FIDDLESTICKS BLVD STE 202-387 FORT MYERS, FL 33912 US

## FEI Number: 46-4166087

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

MANSFIELD BRONSTEIN, PA 3440 HOLLYWOOD BLVD. SUITE 450 HOLLYWOOD, FL 33021 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

# Authorized Person(s) Detail :

Person(s) Detail :		
MANAGING MEMBER	Title	MANAGER
WJS BONDING, LLC	Name	HAT TRICK PROPERTIES, LLC
C/O MANSFIELD BRONSTEIN, 3440 HOLLYWOOD BL	Address	13650 FIDDLESTICKS BLVD STE 202-387
HOLLYWOOD FL 33021	City-State-Zip:	FORT MYERS FL 33912
MANAGER		
FLORIDA PROPERTY PARTNERS, LLC		
3315 NE 15TH ST		
FORT LAUDERDALE FL 33304		
	MANAGING MEMBER WJS BONDING, LLC C/O MANSFIELD BRONSTEIN, 3440 HOLLYWOOD BL HOLLYWOOD FL 33021 MANAGER FLORIDA PROPERTY PARTNERS, LLC	MANAGING MEMBERTitleWJS BONDING, LLCNameC/O MANSFIELD BRONSTEIN, 3440AddressHOLLYWOOD BLCity-State-Zip:HOLLYWOOD FL 33021City-State-Zip:MANAGERFLORIDA PROPERTY PARTNERS, LLC3315 NE 15TH STState-Sta

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 H SHAFFNER

MANAGER

01/07/2017

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: Yes

Date

Date