

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000167385

**Entity Name:** ACG PROPERTIES, LLC

**Current Principal Place of Business:**

1715 CAPE CORAL PARKWAY  
UNIT 14  
CAPE CORAL, FL 33914

**FILED**  
**Mar 18, 2019**  
**Secretary of State**  
**9589520775CC**

**Current Mailing Address:**

1715 CAPE CORAL PARKWAY WEST  
SUITE 14  
CAPE CORAL, FL 33914 US

**FEI Number:** 46-4223202

**Certificate of Status Desired:** No

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

CHRISTIANO, CHRISTOPHER J SR  
4830 SW 25TH CT  
CAPE CORAL, FL 33914 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 MGRM  
Name BCAD PROPERTIES, INC.  
Address 1715 CAPE CORAL PKWY W  
City-State-Zip: CAPE CORAL FL 33914

Title MGR  
Name GS PROPERTY 2 INCORPORATED  
Address 1715 CAPE CORAL PARKWAY W  
City-State-Zip: CAPE CORAL FL 33914

Title MGR  
Name PBA PROPERTIES #6 INC  
Address 116 CHEPSTOW CLOSE  
City-State-Zip: LONDON, ONTARIO N6G3S-2 CAND

*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:** CHRISTOPHER CHRISTIANO

**REGISTERED AGENT**

**03/18/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date