# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000057168

Entity Name: PONCE DE LEON 122 LLC

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

2111 TARPON ROAD NAPLES, FL 34102

### **Current Mailing Address:**

2111 TARPON ROAD NAPLES, FL 34102

# FEI Number: 46-5337810

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

GUITARD, JULIE C 9698 OXFORD STREET NAPLES, FL 34109 US FILED Jan 25, 2018 Secretary of State CC8602711024

Date

Certificate of Status Desired: No

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 :

| Title           | MGRM                      | Title           | MGRM               |
|-----------------|---------------------------|-----------------|--------------------|
| Name            | LADIC, DAVID C            | Name            | GUITARD, JOHN M    |
| Address         | 2111 TARPON ROAD          | Address         | 9698 OXFORD STREET |
| City-State-Zip: | NAPLES FL 34102           | City-State-Zip: | NAPLES FL 34109    |
|                 |                           |                 |                    |
|                 |                           |                 |                    |
| Title           | MGRM                      |                 |                    |
| Title<br>Name   | MGRM<br>GUITARD, MIGUEL A |                 |                    |
|                 |                           |                 |                    |
| Name            | GUITARD, MIGUEL A         |                 |                    |

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 M GUITARD

MGRM

Electronic Signature of Signing Authorized Person(s) Detail