

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000144043

**Entity Name:** DW RESIDENTIAL LLC

**Current Principal Place of Business:**

705 SOUTH 29TH STREET  
1D  
FORT PIERCE, FL 34947

**Current Mailing Address:**

705 SOUTH 29TH STREET  
1D  
FORT PIERCE, FL 34947 US

**FEI Number:** 47-1822763

**Certificate of Status Desired:** Yes

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

WALLACE, DAVID C  
1807 LAKEFRONT BLVD  
FORT PIERCE, FL 34982 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            PRESIDENT  
Name            WALLACE, DAVID C  
Address        705 SOUTH 29TH STREET  
                  1D  
City-State-Zip: FORT PIERCE FL 34947

*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:** DAVID WALLACE

**PRESIDENT**

**06/21/2020**

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

\_\_\_\_\_  
Date