

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000000180

**Entity Name:** 2432 BAXTER COURT, LLC

**Current Principal Place of Business:**

16736 TALL GRASS LN  
CLERMONT, FL 34715

**Current Mailing Address:**

PO BOX 2190  
MINNEOLA, FL 34755 US

**FEI Number:** 47-2762532

**Certificate of Status Desired:** Yes

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

YANKUS, LYNNE M  
16736 TALL GRASS LN  
CLERMONT, FL 34715 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	MGR	Title	MGR
Name	YANKUS, LYNNE M	Name	YANKUS, NORMAN V
Address	PO BOX 2190	Address	PO BOX 2190
City-State-Zip:	MINNEOLA FL 34755	City-State-Zip:	MINNEOLA FL 34755

*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:** LYNNE YANKUS

**MANAGING MEMBER**

**03/16/2017**

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

\_\_\_\_\_  
Date