

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000053688

**Entity Name:** CHERRY OAK MANAGEMENT, LLC

**Current Principal Place of Business:**

3799 N. PINE ISLAND ROAD  
SUNRISE, FL 33351

**Current Mailing Address:**

3799 N. PINE ISLAND ROAD  
SUNRISE, FL 33351 US

**FEI Number:** 47-3584384

**Certificate of Status Desired:** No

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

STACEY HALPERN, P.L.  
ONE N. CLEMATIS STREET  
SUITE 500  
WEST PALM BEACH, FL 33401 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  
Name AGOSTINI, ANNE  
Address 3799 N. PINE ISLAND ROAD  
City-State-Zip: SUNRISE FL 33351

*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:** AGOSTINI , ANNE

MGR

03/10/2018

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

\_\_\_\_\_  
Date