

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000078877

**Entity Name:** 9400 BUSCH DRIVE ASSOCIATES, LLC

**Current Principal Place of Business:**

9400 BUSCH DRIVE NORTH  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

1301 W NEWPORT CENTER DR  
DEERFIELD BEACH, FL 33442-7734

**FEI Number:** 81-0881371

**Certificate of Status Desired:** No

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

MCEWEN, VALERIE M  
1301 W NEWPORT CENTER DR  
DEERFIELD BEACH, FL 33442-7734 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:** VALERIE MCEWEN

04/17/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED REPRESENTATIVE  
Name SANDRIN, SERGIO  
Address 1301 W NEWPORT CENTER DR  
City-State-Zip: DEERFIELD BEACH FL 33442-7734

Title AUTHORIZED MEMBER  
Name WILSON STREET REALTY II, INC.  
Address 1301 W NEWPORT CENTER DR  
City-State-Zip: DEERFIELD BEACH FL 33442-7734

Title AUTHORIZED REPRESENTATIVE  
Name MCEWEN, VALERIE M  
Address 1301 W NEWPORT CENTER DR  
City-State-Zip: DEERFIELD BEACH FL 33442-7734

Title AUTHORIZED REPRESENTATIVE  
Name BROWNE, ROBERT J  
Address 620 BOCA MARINA COURT  
City-State-Zip: BOCA RATON FL 33487

Title AUTHORIZED REPRESENTATIVE  
Name BROWNE, LISA M  
Address 397 NE SPANISH TRAIL  
City-State-Zip: BOCA RATON FL 33432

Title MANAGER  
Name BROWNE, ROBERT M  
Address 1301 W NEWPORT CENTER DR  
City-State-Zip: DEERFIELD BEACH FL 33442-7734

*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:** VALERIE M MCEWEN

**AUTHORIZED  
REPRESENTATIVE**

04/17/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date