

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000084895

**Entity Name:** CHERISHOME ALTAMONTE LLC

**Current Principal Place of Business:**

5277 WELLINGTON PARK CIRCLE  
ORLANDO, FL 32839

**Current Mailing Address:**

5277 WELLINGTON PARK CIRCLE  
ORLANDO, FL 32839 US

**FEI Number:** 47-4052573

**Certificate of Status Desired:** No

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

STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON, P.A. C/O CHRISTIAN  
F. O'RYAN, ESQ.  
401 EAST JACKSON STREET  
SUITE 2200  
TAMPA, FL 33602 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:** CHRISTIAN F. O'RYAN

04/29/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            MCARTHUR, ROBERT  
Address        5277 WELLINGTON PARK CIRCLE  
City-State-Zip: ORLANDO FL 32839

Title            VICE PRESIDENT/TREASURER  
Name            MCARTHUR, JAMES  
Address        5277 WELLINGTON PARK CIRCLE  
City-State-Zip: ORLANDO FL 32839

Title            SECRETARY  
Name            MCARTHUR, LAURIE  
Address        5277 WELLINGTON PARK CIRCLE  
City-State-Zip: ORLANDO FL 32839

*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:** MCARTHUR, ROBERT

PRESIDENT

04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date