## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000102810

Entity Name: OCPBC INVESTMENTS WELLINGTON, LLC

**Current Principal Place of Business:** 

180 JFK DRIVE SUITE 100

ATLANTIS, FL 33462

**FILED** Apr 30, 2022 Secretary of State 1315887701CC

# **Current Mailing Address:**

180 JFK DRIVE SUITE 100

ATLANTIS, FL 33462 US

FEI Number: 87-2791161 Certificate of Status Desired: No

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

KOHN, MARVIN A DR. 180 JFK DRIVE SUITE 100 ATLANTIS, FL 33462 US

City-State-Zip:

Address

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: DR. MARVIN A KOHN 04/30/2022

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **DIRECTOR** Title DIRECTOR

Name CLANCY, JAMES T DR. Name KOHN, MARVIN A DR.

180 JFK DRIVE 180 JFK DRIVE Address Address

SUITE 100 SUITE 100

City-State-Zip: ATLANTIS FL 33462 City-State-Zip: ATLANTIS FL 33462

Title **DIRECTOR** Title **DIRECTOR** 

Name RICHMAN, GARY M DR. Name BERKOWITZ, EZRA DR.

Address 180 JFK DRIVE Address 180 JFK DRIVE

SUITE 100 SUITE 100

ATLANTIS FL 33462 City-State-Zip: ATLANTIS FL 33462

Title DIRECTOR Title DIRECTOR

D'ARIANO, GERARD DR. COHN, MICHAEL DR. Name Name

180 JFK DRIVE 180 JFK DRIVE Address Address

SUITE 100 SUITE 100

City-State-Zip: ATLANTIS FL 33462 City-State-Zip: ATLANTIS FL 33462

**DIRECTOR** Title Title DIRECTOR

Name LEVIN. JOHN DR. Name ROSENFIELD, JEFFREY DR.

180 JFK DRIVE Address 180 JFK DRIVE SUITE 100

SUITE 100

ATLANTIS FL 33462 ATLANTIS FL 33462 City-State-Zip: City-State-Zip:

## Continues on page 2

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.

04/30/2022 SIGNATURE: JAMES T. CLANCY, D.P.M. DIRECTOR

# **Authorized Person(s) Detail Continued:**

DIRECTOR Title

Name MIKOLAJCZAK, MICHAEL DR.

180 JFK DRIVE SUITE 100 Address

City-State-Zip: ATLANTIS FL 33462