

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000120907

Entity Name: 5052 ANGOLA CIRCLE LLC

Current Principal Place of Business:

5738 REYNOLDS ROAD
WELLINGTON, FL 33449

Current Mailing Address:

PO BOX 210217
ROYAL PALM BEACH, FL 33421

FEI Number: 81-3407557

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEITH D. KERN, P.A.
238 NE 1ST AVENUE
DELRAY BEACH, FL 33444 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 AMBR
Name ISRAEL, JOSEPH
Address 5738 REYNOLDS ROAD
City-State-Zip: WELLINGTON FL 33449

Title AMBR
Name ISRAEL, MARIE
Address 5783 REYNOLDS ROAD
City-State-Zip: WELLINGTON FL 33449

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: JOSEPH ISRAEL

OWNER/MGR

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date