

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000180655

**Entity Name:** POPPIS WAY, LLC.

**Current Principal Place of Business:**

223 BLUE CREEK DRIVE  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

223 BLUE CREEK DRIVE  
WINTER SPRING, FL 32708 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

GILIBERTI, JOSEPH A  
223 BLUE CREEK DRIVE  
WINTER SPRINGS, FL 32708 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 PRES  
Name GILIBERTI, JOSEPH A  
Address 223 BLUE CREEK DRIVE  
City-State-Zip: WINTER SPRINGS FL 32708

Title VP  
Name GILIBERTI, TERRI L  
Address 223 BLUE CREEK DRIVE  
City-State-Zip: WINTER SPRINGS FL 32708

Title TRES  
Name GILIBERTI, GABRIELLA V  
Address 2661 SWEET MAGNOLIA PLACE  
City-State-Zip: OVIEDO FL 32765

Title MGR  
Name GILIBERTI, DAVID M  
Address 223 BLUE CREEK DRIVE  
City-State-Zip: WINTER SPRINGS FL 32708

*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:** TERRI LEE GILIBERTI

VP

03/15/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date