

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000105003

Entity Name: IDEAL LIFESTYLE CENTERS, LLC

Current Principal Place of Business:

125 W PINEVIEW ST
1009
ALTAMOMTE SPRINGS, FL 32714

Current Mailing Address:

619 BAINBRIDGE LOOP
WINTER GARDEN, FL 34787 US

FEI Number: 83-0574813

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEAURY, LISA
619 BAINBRIDGE LOOP
WINTER GARDEN, FL 34787 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	MGR	Title	MGR
Name	SHAW, MAUREEN A	Name	BEAURY, LISA M
Address	2697 BELLEWATER PL	Address	619 BAINBRIDGE LOOP
City-State-Zip:	OVIDO FL 32765	City-State-Zip:	WINTER GARDEN FL 34787

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: LISA BEAURY

MANAGER

04/15/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date