

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000136592

**Entity Name:** 509 ISLE OF CAPRI TWO, LLC

**Current Principal Place of Business:**

99 NESBIT ST  
PUNTA GORDA, FL 33950

**Current Mailing Address:**

99 NESBIT ST  
PUNTA GORDA, FL 33950 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

HOLMES, DAVID A  
99 NESBIT ST  
PUNTA GORDA, FL 33950 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  
Name HORCASITAS, VINCENT  
Address 2287 MONTAUK HWY  
City-State-Zip: BRIDGEHAMPTON NY 11932

Title MGR  
Name PAOLINO, LOUIS D JR  
Address 100 S POINTE DR #3  
City-State-Zip: MIAMI BEACH FL 33139

Title MGR  
Name EHRLICH, DAVID  
Address 174 NASSAU ST #1200  
City-State-Zip: PRINCETON NJ 08542

*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:** DAVID EHRLICH

MANAGER

06/28/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date