

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000161438

**Entity Name:** FLAMINGO PALMS VACATION RENTALS L.L.C.

**Current Principal Place of Business:**

8437 TUTTLE AVE.  
SUITE 304  
SARASOTA, FL 34243

**Current Mailing Address:**

8437 TUTTLE AVE.  
SUITE 304  
SARASOTA, FL 34243 US

**FEI Number:** 83-1097104

**Certificate of Status Desired:** No

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

PIKE, PETER  
5220 PAYLON LN  
SARASOTA, FL 34240 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 HICKMOTT, MICHAEL  
Address 2974 57TH STREET  
City-State-Zip: SARASOTA FL 34243

Title FINMGR, CFO  
Name GIACOIA, FONDA HULL  
Address 8437 TUTTLE AVE.  
SUITE 304  
City-State-Zip: SARASOTA FL 34243

*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:** MICHAEL HICKMOTT

**MNG. DIRECTOR**

**04/26/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date