

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000120050

Entity Name: BIG WAVE TITLE, LLC**Current Principal Place of Business:**103 NE 2D AVENUE
DELRAY BEACH, FL 33444**Current Mailing Address:**103 NE 2D AVENUE
DELRAY BEACH, FL 33444**FEI Number:** 83-4718687**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAVLIK, MARK D
747 CAMINO LAKES CIRCLE
BOCA RATON, FL 33486 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	HAVLIK, MAUREEN Y
Address	103 NE 2D AVENUE
City-State-Zip:	DELRAY BEACH FL 33444

Title	MGR
Name	WALTER, JERILYN
Address	103 NE 2D AVENUE
City-State-Zip:	DELRAY BEACH FL 33444

Title	MGR
Name	AGRONOW, CAROL A
Address	103 NE 2D AVENUE
City-State-Zip:	DELRAY BEACH FL 33444

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: MAUREEN Y. HAVLIK**MANAGING MEMBER****01/03/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date