

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000003067

**Entity Name:** RESTORE PGA, LLC

**Current Principal Place of Business:**

400 BONTONA AVENUE  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

400 BONTONA AVENUE  
FORT LAUDERDALE, FL 33301

**FEI Number:** 84-4579238

**Certificate of Status Desired:** No

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

SCHILLER, LISA M  
400 BONTONA AVENUE  
FORT LAUDERDALE, FL 33301 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 AMBR  
Name SCHILLER, LISA M  
Address 400 BONTONA AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33301

Title AMBR  
Name WEISS, KIMBERLE  
Address 616 CLEARWATER PARK ROAD, PH3  
City-State-Zip: WEST PALM BEACH FL 33401

Title AMBR  
Name FRANCELLE, THOMAS  
Address 150 SE 2ND AVENUE, #315  
City-State-Zip: DELRAY BEACH FL 33401

*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 MONICA SCHILLER

**MANAGING MEMBER**

**06/23/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date