

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000158583

**Entity Name:** AVERY SPRINGS DEVELOPMENT GROUP, LLC

**Current Principal Place of Business:**

3970 MINTON RD  
WEST MELBOURNE, FL 32904

**Current Mailing Address:**

3970 MINTON RD  
WEST MELBOURNE, FL 32904 US

**FEI Number: 85-1441655**

**Certificate of Status Desired: No**

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

MASONE, ANTHONY  
3970 MINTON RD  
WEST MELBOURNE, FL 32904 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           MANAGER  
Name           POWSHOK, ANDREW  
Address        3970 MINTON RD  
City-State-Zip: WEST MELBOURNE FL 32904

Title           MANAGER  
Name           LANDMASTERS DEVELOPMENT, INC  
Address        3970 MINTON RD  
City-State-Zip: WEST MELBOURNE FL 32904

Title           MANAGER  
Name           CYPRESS GULF, INC.  
Address        3970 MINTON RD  
City-State-Zip: WEST MELBOURNE FL 32904

Title           MANAGER  
Name           TRIANGLE PALM BAY, LLC  
Address        3970 MINTON RD  
City-State-Zip: WEST MELBOURNE FL 32904

*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: ANDREW POWSHOK**

**MGR**

**01/13/2021**

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

\_\_\_\_\_  
Date