

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000196350

Entity Name: CENTERPOINTE APARTMENTS, LLC

Current Principal Place of Business:

283 CRANES ROOST BLVD SUITE 250
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

283 CRANES ROOST BLVD SUITE 250
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 92-3617580

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARUSO, AMANDA
283 CRANES ROOST BLVD, SUITE 250
ALTAMONTE SPRINGS, FL 32701 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 EMERSON INTERNATIONAL, INC.
Address 283 CRANES ROOST BLVD, SUITE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title AP
Name CLABER, JONATHAN
Address 283 CRANES ROOST BLVD, SUITE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title AMBR
Name THOMAS, SHARON
Address 283 CRANES ROOST BLVD, SUITE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title AR
Name PITT, LAWRENCE B
Address 283 CRANES ROOST BLVD, SUITE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title AR
Name CARUSO, AMANDA
Address 283 CRANES ROOST BLVD, SUITE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title AP
Name MEEKS, KIMBERLY
Address 283 CRANES ROOST BLVD, SUITE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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: AMANDA CARUSO

VICE PRESIDENT

03/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date