## 2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0000001292

Entity Name: ACQUALINA MANAGEMENT, LLC

**Current Principal Place of Business:** 

17875 COLLINS AVENUE

SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:** 

17875 COLLINS AVENUE

SUNNY ISLES BEACH. FL 33160

FEI Number: 01-0811837 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYES STREET TALLAHASSEE, FL 32301 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

FILED Apr 25, 2014

**Secretary of State** 

CC2043014940

Authorized Person(s) Detail:

Title MGRM Title TREASURER

Name ACQUALINA HOLDINGS, INC. Name LILLYCROP, WILLIAM J

Address 17780 COLLINS AVENUE 2ND FLR Address 17780 COLLINS AVENUE 2ND FLR

City-State-Zip: SUNNY ISLES FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

Title VP Title EVP

Name DEGNAN, BRIAN Name LIEB, JAMES

Address 4000 ISLAND BLVD., PH2 Address 4000 ISLAND BLVD., PH2

City-State-Zip: AVENTURA FL 33160 City-State-Zip: AVENTURA FL 33160

Title AVP Title CFO, VP

Name TORPEY, CARITE Name SHMUELI, OREN

Address 4000 ISLAND BLVD., PH2 Address 17780 COLLINS AVENUE, 2ND FLR
City-State-Zip: AVENTURA FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

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: WILLIAM J LILLYCROP

TREASURER, A-SEC

04/25/2014