

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000006021

**FILED**  
**May 01, 2019**  
**Secretary of State**  
**7898601645CC**

**Entity Name:** TOYAN ENTERPRISES, LLC

**Current Principal Place of Business:**

700 UNIVERSE BLVD.  
ATTN: CORP GOV  
JUNO BEACH, FL 33408

**Current Mailing Address:**

700 UNIVERSE BLVD.  
ATTN: CORP GOV - LAW/JB  
JUNO BEACH, FL 33408 US

**FEI Number:** 94-3096153

**Certificate of Status Desired:** No

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

LEE, DAVID M  
700 UNIVERSE BLVD.  
JUNO BEACH, FL 33408 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:** DAVID M. LEE

05/01/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            ARECHABALA, MIGUEL  
Address        700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title            VP  
Name            FORREST, SAM A  
Address        700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title            VP, TREASURER  
Name            CUTLER, PAUL I  
Address        700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title            SECRETARY  
Name            SEELEY, W SCOTT  
Address        700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title            ASST. SECRETARY  
Name            PLOTSKY, MELISSA A  
Address        700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title            ASST. TREASURER  
Name            BALZANO, JOSEPH  
Address        700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title            ASST. TREASURER  
Name            PORTALES, ALDO  
Address        700 UNIVERSE BLVD.  
City-State-Zip: JUNO BEACH FL 33408

Title            ASSISTANT TREASURER  
Name            FINNIS, AMANDA M  
Address        700 UNIVERSE BLVD.  
ATTN: CORP GOV  
City-State-Zip: JUNO BEACH FL 33408

*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:** W. SCOTT SEELEY

**SECRETARY**

05/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date