# 2021 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M09000001971

Entity Name: HARD ROCK AQUEDUCT, LLC

Aug 06, 2021 Secretary of State 8067559946CC

**FILED** 

## **Current Principal Place of Business:**

**EXECUTIVE OFFICES - ONE SEMINOLE WAY** 

2ND FLOOR

HOLLYWOOD, FL 33314

#### **Current Mailing Address:**

EXECUTIVE OFFICES - ONE SEMINOLE WAY 2ND FLOOR HOLLYWOOD, FL 33314

FEI Number: 36-4656408 Certificate of Status Desired: No

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Address

Electronic Signature of Registered Agent

Date

#### Authorized Person(s) Detail:

Title MGR, PRESIDENT/CEO Title MGR

Name ALLEN, JAMES F Name BUCHANAN, BRAD

Address ONE SEMINOLE WAY - 2ND FLOOR Address ONE SEMINOLE WAY - 2ND FLOOR

City-State-Zip: HOLLYWOOD FL 33314 City-State-Zip: HOLLYWOOD FL 33314

Title MGR Title MGR

Name SHORE, JIM Name RUMBOLZ, MICHAEL D

Address ONE SEMINOLE WAY - 2ND FLOOR Address ONE SEMINOLE WAY - 2ND FLOOR

City-State-Zip: HOLLYWOOD FL 33314 City-State-Zip: HOLLYWOOD FL 33314

Title MGR Title MGR

Name GIPS, ROBERT L Name GOPHER, CARLA

Address EXECUTIVE OFFICES - ONE Address EXECUTIVE OFFICES - ONE

SEMINOLE WAY
2ND FLOOR
2ND FLOOR

City-State-Zip: HOLLYWOOD FL 33314 City-State-Zip: HOLLYWOOD FL 33314

Title MGR Title MGR

Name BILLIE-MOTLOW, AGNES Name JOHNS, ALEXANDER P

EXECUTIVE OFFICES - ONE Address EXECUTIVE OFFICES - ONE

SEMINOLE WAY
2ND FLOOR
2ND FLOOR

City-State-Zip: HOLLYWOOD FL 33314 City-State-Zip: HOLLYWOOD FL 33314

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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: JOHN ROBERT EDER TREASURER 08/06/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

## **Authorized Person(s) Detail Continued:**

Title MGR

Name WHIDDEN, CONNIE

**EXECUTIVE OFFICES - ONE SEMINOLE WAY** Address

2ND FLOOR

City-State-Zip: HOLLYWOOD FL 33314

Title EVP, CFO, SECRETARY &

TREASURER

EDER, JOHN Name

**EXECUTIVE OFFICES - ONE** Address

SEMINOLE WAY 2ND FLOOR

City-State-Zip: HOLLYWOOD FL 33314