

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000500421

**Entity Name:** 5500 MANAGEMENT LLC

**Current Principal Place of Business:**

5500 BEE RIDGE ROAD  
SUITE 101  
SARASOTA, FL 34233

**Current Mailing Address:**

16528 N DALE MABRY HWY  
TAMPA, FL 33618 US

**FEI Number:** 87-3757091

**Certificate of Status Desired:** No

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

SANDERS, BRIAN  
16528 N DALE MABRY HWY  
TAMPA, FL 33618 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 MENGELBERG, JOHN  
Address 5500 BEE RIDGE RD SUITE 101  
City-State-Zip: SARASOTA FL 34233

*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 MENGELBERG

MGR

01/24/2023

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

\_\_\_\_\_  
Date