

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000017969

**Entity Name:** WLC, LLC

**Current Principal Place of Business:**

417 LONG COVE ROAD  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

417 LONG COVE ROAD  
ORMOND BEACH, FL 32174

**FEI Number:** 22-3857889

**Certificate of Status Desired:** No

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

FRIEBIS, DANIEL S  
3890 TURTLE CREEK DRIVE  
SUITE B  
PORT ORANGE, FL 32127 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	MGRM	Title	AUTHORIZED MEMBER
Name	CURTIS, MARGARET W	Name	WILLIAMS, KRISTEN
Address	417 LONG COVE ROAD	Address	1609 PURPLE SAGE CT.
City-State-Zip:	ORMOND BEACH FL 32174	City-State-Zip:	CHARLOTTESVILLE VA 22901

*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:** MARGARET W. CURTIS

**MANAGING MEMBER**

**03/14/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date