

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013726

Entity Name: ENTA INVESTMENTS LLC

Current Principal Place of Business:

1330 SOUTH FORT HARRISON AVE.
CLEARWATER, FL 33756

Current Mailing Address:

1330 SOUTH FORT HARRISON AVE.
CLEARWATER, FL 33756

FEI Number: 74-3087955

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALLON, ANDREW DR.
3190 MCMULLEN BOOTH ROAD
SUITE 100
CLEARWATER, FL 33761 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: ANDREW MALLON MD

03/15/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	MILLER, MITCHELL B MD	Name	MULLER, CHRISTOPHER D MD
Address	1330 SOUTH FORT HARRISON AVE	Address	1330 SOUTH FORT HARRISON AVE.
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756
Title	MGR	Title	MGR
Name	MORGAN, JONATHAN M MD	Name	HOOD, DAVID C MD
Address	1330 SOUTH FORT HARRISON AVE.	Address	1330 SOUTH FORT HARRISON AVE.
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756
Title	MANAGER	Title	MANAGER
Name	MERCHANT, FAISAL	Name	MALLON, ANDREW DR.
Address	1330 SOUTH FORT HARRISON AVE.	Address	1330 SOUTH FORT HARRISON AVE.
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756
Title	MANAGER	Title	MANAGER
Name	GREENE, SCOTT DR.	Name	CLAVENNA, MATTHEW DR.
Address	1330 SOUTH FORT HARRISON AVE.	Address	1330 SOUTH FORT HARRISON AVE.
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756

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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: ANDREW MALLON

MANAGING PARTNER

03/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MANAGER
Name DONNELLY, KEVIN
Address 1330 SOUTH FORT HARRISON AVE.
City-State-Zip: CLEARWATER FL 33756

Title MANAGER
Name RESCHLY, WILLIAM
Address 1330 SOUTH FORT HARRISON AVE.
City-State-Zip: CLEARWATER FL 33756

Title MANAGER
Name PARASHER, SHRUTHI
Address 1330 SOUTH FORT HARRISON AVE.
City-State-Zip: CLEARWATER FL 33756