

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000043985

**Entity Name:** ARH DEVELOPMENT, LLC

**Current Principal Place of Business:**

2827 SILVERLEAF LANE  
NAPLES, FL 34105

**Current Mailing Address:**

2827 SILVERLEAF LANE  
NAPLES, FL 34105

**FEI Number:** 55-0853621

**Certificate of Status Desired:** Yes

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

MURRELL, HOWARD J  
3494 SHEARWATER STREET  
NAPLES, FL 34117 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  
Name MURRELL, HOWARD J  
Address 2827 SILVERLEAF LANE  
City-State-Zip: NAPLES FL 34105

Title AUTHORIZED MEMBER  
Name MURRELL, STACEY L  
Address 2827 SILVERLEAF LANE  
City-State-Zip: NAPLES FL 34105

Title AUTHORIZED REPRESENTATIVE  
Name MURRELL, RACHEL S  
Address 2827 SILVERLEAF LANE  
City-State-Zip: NAPLES FL 34105

Title AUTHORIZED REPRESENTATIVE  
Name MURRELL, ALLISON B  
Address 2827 SILVERLEAF LANE  
City-State-Zip: NAPLES FL 34105

Title AUTHORIZED REPRESENTATIVE  
Name MURRELL, HOWARD J III  
Address 2827 SILVERLEAF LANE  
City-State-Zip: NAPLES FL 34105

*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:** STACEY L MURRELL

**AUTHORIZED MEMBER**

**02/09/2021**

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

\_\_\_\_\_  
Date