## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000156

Entity Name: 8770 MIDNIGHT PASS, LLC

**Current Principal Place of Business:** 

8764 MIDNIGHT PASS

A-401

SARASOTA, FL 34242

**Current Mailing Address:** 

3681 FOLLY QUARTER RD ELLICOTT CITY, MD 21042 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HYMAN, LAWRENCE R 8764 MIDNIGHT PASS A-401 SARASOTA, FL 34242 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: LAWRENCE R HYMAN 01/11/2021

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title DR. Title MRS.

Name HYMAN, LAWRENCE R Name HYMAN, LOIS W

Address 3681 FOLLY QUARTER RD Address 3681 FOLLY QUARTER RD

City-State-Zip: ELLICOTT CITY MD 21042 City-State-Zip: ELLICOTT CITY MD 21042

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.

FILED Jan 11, 2021

**Secretary of State** 

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