

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000075715

**Entity Name:** 12670 CREEKSIDE COMPANY, LLC**Current Principal Place of Business:**12670 CREEKSIDE LANE  
FORT MYERS, FL 33919**Current Mailing Address:**12670 CREEKSIDE LANE  
SUITE 202  
FORT MYERS, FL 33919 US**FEI Number:** 59-2750728**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FARMER, MARK E  
12670 CREEKSIDE LANE  
SUITE 202  
FORT MYERS, FL 33919 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:** MARK E FARMER

02/17/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR
Name	COLLINS, SANDRA
Address	12670 CREEKSIDE LANE SUITE 202
City-State-Zip:	FORT MYERS FL 33919-3370

Title	MGR
Name	BELIS, ANDREW
Address	12670 CREEKSIDE LANE
City-State-Zip:	FORT MYERS FL 33919

Title	MGR
Name	GROSS, ANDREW
Address	12670 CREEKSIDE LANE
City-State-Zip:	FORT MYERS FL 33919

Title	MGR
Name	MEHALIK, JOHN
Address	12670 CREEKSIDE LANE
City-State-Zip:	FORT MYERS FL 33919

Title	CHIEF ADMINISTRATOR
Name	AYERS, BECKY LYNNE DR.
Address	12670 CREEKSIDE LANE
City-State-Zip:	FORT MYERS FL 33919

*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 MEHALIK**MEMBER**

02/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date