

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089142

Entity Name: APPLETON ENTRPRISES LLC

Current Principal Place of Business:

1488 KEYSTONE RIDGE CIRCLE
TARPON SPRINGS, FL 34688

Current Mailing Address:

1488 KEYSTONE RIDGE CIRCLE
TARPON SPRINGS, FL 34688 US

FEI Number: 26-1076350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

APPLETON, COLIN
1488 KEYSTONE RIDGE CIRCLE
TARPON SPRINGS, FL 34688 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 MGR
Name APPLETON, COLIN
Address 1488 KEYSTONE RIDGE CIRCLE
City-State-Zip: TARPON SPRINGS FL 34688

Title MGR
Name APPLETON, ANN
Address 1488 KEYSTONE RIDGE CIRCLE
City-State-Zip: TARPON SPRINGS FL 34688

Title MGR
Name GRAHAM WADE, EVE
Address 1953 OSWEGO DRIVE
City-State-Zip: HOLIDAY FL 34691

Title MGR
Name GRAHAM, LAUREN
Address 658 B-5 GREEN VALLEY RD
City-State-Zip: PALM HARBOR FL 34683

Title AMBR
Name WADE, NICHOLAS ALEXANDER
Address 1953 OSWEGO DR
City-State-Zip: HOLIDAY FL 34691

Title AMBR
Name APPLETON, CLARK
Address 1488 KEYSTONE RIDGE CIR
City-State-Zip: TARPON SPRINGS FL 34688

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: COLIN APPLETON

MGR

01/10/2021

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date