

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000050643

Entity Name: ANNWYN EQUESTRIAN CENTER LLC

Current Principal Place of Business:

2916 N. VALRICO ROAD
SEFFNER, FL 33584

Current Mailing Address:

1010 ARISTA BLVD
VALRICO, FL 33594 US

FEI Number: 26-4672104

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PETERSEN, KATHLEEN
2916 N. VALRICO ROAD
SEFFNER, FL 33584 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: KATHLEEN PETERSEN

01/29/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | | | |
|-----------------|------------------------|-----------------|-------------------------|
| Title | MGRM | Title | MGRM |
| Name | PETERSEN, KATHLEEN | Name | MITCHELL, SUSAN |
| Address | 2916 N. VALRICO ROAD | Address | 9920 TREE TOPS LAKE RD. |
| City-State-Zip: | SEFFNER FL 33584 | City-State-Zip: | TAMPA FL 33626 |
| | | | |
| Title | MGRM | | |
| Name | MITCHELL, DENNIS | | |
| Address | 9920 TREE TOPS LAKE RD | | |
| City-State-Zip: | TAMPA FL 33626 | | |

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: KATHLEEN PETERSEN

PRESIDENT

01/29/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date