

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000066567

**Entity Name:** TWIN CREEK RANCH, LLC

**Current Principal Place of Business:**

1836 MONTGOMERY PL  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

1836 MONTGOMERY PL  
JACKSONVILLE, FL 32205 US

**FEI Number:** 27-0520904

**Certificate of Status Desired:** No

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

FISHER, TOUSEY, LEAS & BALL, P.A.  
501 RIVERSIDE AVENUE  
SUITE 600  
JACKSONVILLE, FL 32202 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 ANDERSON, MARK W  
Address 1836 MONTGOMERY PL  
City-State-Zip: JACKSONVILLE FL 32205

Title VP  
Name ANDERSON, ADDISON  
Address 1836 MONTGOMERY PL  
City-State-Zip: JACKSONVILLE FL 32205

Title VP  
Name ANDERSON, SCOTT  
Address 1836 MONTGOMERY PL  
City-State-Zip: JACKSONVILLE FL 32205

*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:** MARK ANDERSON

**PRESIDENT**

**03/08/2024**

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

\_\_\_\_\_  
Date