

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000117328

**Entity Name:** POWELL GP LLC

**Current Principal Place of Business:**

70990 STAR SHADOW RD.  
MOUNTAIN CENTER, CA 92561

**Current Mailing Address:**

70990 STAR SHADOW RD.  
MOUNTAIN CENTER, CA 92561 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

GERALD W. GRITTER PA  
120 E. PALMETTO PARK ROAD  
SUITE 425  
BOCA RATON, FL 33432 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:** GERALD W. GRITTER

02/08/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AUTHORIZED MEMBER
Name	ZAMIS, GARY	Name	POWELL, LOU ANN
Address	70990 STAR SHADOW RD.	Address	219 W SABAL PALM PL
City-State-Zip:	MOUNTAIN CENTER CA 92561	City-State-Zip:	LONGWOOD FL 32779

*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:** GARY ZAMIS

MGR

02/08/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date