

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000081202

**Entity Name:** XTENDED PLAY, LLC

**Current Principal Place of Business:**

5601 2ND STREET, W.  
LEHIGH ACRES, FL 33971

**Current Mailing Address:**

5601 2ND STREET, W.  
LEHIGH ACRES, FL 33971

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

NIENKERK, JODI  
6017 PINE RIDGE ROAD  
NAPLES, FL 34119 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:** JODI NIENKERK

04/25/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name BAILEY, JANA LYNN  
Address 5601 2ND STREET W.  
City-State-Zip: LEHIGH ACRES FL 33971

*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:** JANA LYNN BAILEY

MGRM

04/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date