

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000031872

Entity Name: GOODWIN GROVES L.L.C.**Current Principal Place of Business:**23330 SW 162 AVE
HOMESTEAD, FL 33031**Current Mailing Address:**30581 SW 188 COURT
HOMESTEAD, FL 33030 US**FEI Number:** 45-4750102**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WARD, JENNIFER L
30581 SW 188TH COURT
HOMESTEAD, FL 33030 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:** JENNIFER LYNN WARD

01/29/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name GOODWIN, BRIAN D
Address 30581 SW 188 COURT
City-State-Zip: HOMESTEAD FL 33030

Title MGRM
Name GOODWIN, BRIAN D
Address 30581 SW 188 COURT
City-State-Zip: HOMESTEAD FL 33030

Title MGRM
Name GOODWIN, BRIAN D
Address 30581 SW 188 COURT
City-State-Zip: HOMESTEAD FL 33030

Title MGRM
Name GOODWIN, BRIAN D
Address 30581 SW 188 COURT
City-State-Zip: HOMESTEAD FL 33030

Title MGRM
Name GOODWIN, BRIAN D
Address 30581 SW 188 COURT
City-State-Zip: HOMESTEAD FL 33030

Title MGRM
Name GOODWIN, BRIAN D
Address 30581 SW 188 COURT
City-State-Zip: HOMESTEAD FL 33030

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: BRIAN GOODWIN**OWNER**

01/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date