## **2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000033903

Entity Name: 1011 IMMOKALEE, LLC

**Current Principal Place of Business:** 

3249 STATE RD 60 EAST LAKE WALES, FL 33898

**Current Mailing Address:** 

**PO BOX 190** 

FROSTPROOF, FL 33843 US

FEI Number: 45-4741699 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BACH, STORY 1446 SW BALMORAL TRACE STUART, FL 34997 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: STORY BACH 04/19/2022

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name BACH, CHRISTOPHER D Name BACH, GAIL L

Address 3249 STATE ROAD 60 EAST Address 1446 SW BALMORAL TRACE

City-State-Zip: LAKE WALES FL 33898 City-State-Zip: LAKE WALES FL 33898

Title MGRM

Name BACH, STORY L

Address 1446 SW BALMORAL TRACE
City-State-Zip: LAKE WALES FL 33898

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: STORY BACH

Electronic Signature of Signing Authorized Person(s) Detail

MANAGING MEMBER

04/19/2022

FILED Apr 19, 2022

**Secretary of State** 

0717603631CC

Date

Date