

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000093212

**Entity Name:** VICTORY VILLAGE LA LLC

**Current Principal Place of Business:**

157 E NEW ENGLAND AVE  
STE 240  
WINTER PARK, FL 32789

**Current Mailing Address:**

157 E NEW ENGLAND AVE  
STE 240  
WINTER PARK, FL 32789

**FEI Number:** 46-0298542

**Certificate of Status Desired:** No

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

MARIO A. GARCIA P.A.  
400 N FERNCREEK AVE  
ORLANDO, FL 32803 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 MEMBER  
Name ESTEFANO, CRISAFI  
Address 157 E NEW ENGLAND AVE  
STE 240  
City-State-Zip: WINTER PARK FL 32789

Title MEMBER  
Name CAMACHO, JOSE  
Address 157 E NEW ENGLAND AVE  
STE 240  
City-State-Zip: WINTER PARK FL 32789

Title MEMBER  
Name LAFONT, JUAN  
Address 157 E NEW ENGLAND AVE  
STE 240  
City-State-Zip: WINTER PARK FL 32789

Title MEMBER  
Name LAFONT, CARLOS  
Address 157 E NEW ENGLAND AVE  
STE 240  
City-State-Zip: WINTER PARK FL 32789

*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:** ESTEFANO CRISAFI

**MEMBER**

**01/30/2024**

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

\_\_\_\_\_  
Date