

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000011161

**Entity Name:** AAN MANAGEMENT, LLC

**Current Principal Place of Business:**

15857 SW 11TH STREET  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

15857 SW 11TH STREET  
PEMBROKE PINES, FL 33027

**FEI Number:** 46-2177898

**Certificate of Status Desired:** No

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

ATKINSON, ALIA  
15857 SW 11TH STREET  
PEMBROKE PINES, FL 33027 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 MGR  
Name ATKINSON, ALIA  
Address 15857 SW 11TH STREET  
City-State-Zip: PEMBROKE PINES FL 33027

Title MGR  
Name ATKINSON, SHARON  
Address 15857 SW 11TH STREET  
City-State-Zip: PEMBROKE PINES FL 33027

Title M  
Name ST CYR, SANNICA  
Address 4097 HEIRLOOM ROSE PLACE  
City-State-Zip: OVIEDO FL 32766

*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:** SHARON ATKINSON

01/06/2020

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

\_\_\_\_\_  
Date