

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000029620

**Entity Name:** 104 SINCLAIR ST, LLC

**Current Principal Place of Business:**

4330 HARBOR BLVD  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

4330 HARBOR BLVD  
PORT CHARLOTTE, FL 33952

**FEI Number:** 46-5139233

**Certificate of Status Desired:** No

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

PARQUETTE, MARK  
4330 HARBOR BLVD  
PORT CHARLOTTE, FL 33952 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	MGRM	Title	MGR
Name	PARQUETTE, MARK	Name	PARQUETTE, MARTIN
Address	4330 HARBOR BLVD	Address	157 CARPENTER RD
City-State-Zip:	PORT CHARLOTTE FL 33952	City-State-Zip:	WALPOLE MA 02081

*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:** MARK PARQUETTE

**MANAGER**

**03/17/2020**

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

\_\_\_\_\_  
Date