

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000071114

**Entity Name:** LEISURE PHM LLC

**Current Principal Place of Business:**

% CHASE ENTERPRISES  
225 ASYLUM ST., 29TH FLOOR  
HARTFORD, CT 06103-1538

**Current Mailing Address:**

% CHASE ENTERPRISES  
225 ASYLUM ST., 29TH FLOOR  
HARTFORD, CT 06103-1538

**FEI Number:** 46-2854336

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	Title	MGR
Name	CHASE, CHERYL A	Name	CHASE, ARNOLD L
Address	C/O CHASE ENTERPRISES 225 ASYLUM ST 29TH FL	Address	C/O CHASE ENTERPRISES 225 ASYLUM ST 29TH FL
City-State-Zip:	HARTFORD CT 06103-1534	City-State-Zip:	HARTFORD CT 06103-1534

*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:** CHERYL A CHASE

**MANAGER**

**04/10/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date