

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000098160

**Entity Name:** 6730 N BRANDEMERE ROAD, LLC

**Current Principal Place of Business:**

1592 COOL RAIN CT.  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

2771-29 MONUMENT RD, SUITE #214  
SUITE #214  
JACKSONVILLE, FL 32225 US

**FEI Number:** 46-3263451

**Certificate of Status Desired:** No

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

JOHNSON, STANLEY L  
2771-29 MONUMENT RD, SUITE #214  
SUITE #214  
JACKSONVILLE, FL 32225 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            | JOHNSON, STANLEY L                            | Name            | JOHNSON, LISA L                               |
| Address         | 2771-29 MONUMENT RD, SUITE #214<br>SUITE #214 | Address         | 2771-29 MONUMENT RD, SUITE #214<br>SUITE #214 |
| City-State-Zip: | JACKSONVILLE FL 32225                         | City-State-Zip: | JACKSONVILLE FL 32225                         |

*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:** LISA JOHNSON

MGR

03/24/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date