

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000055770

Entity Name: CHSW MARINE, LLC**Current Principal Place of Business:**ONE INDEPENDENT DRIVE
SUITE 1620
JACKSONVILLE, FL 32202**Current Mailing Address:**ONE INDEPENDENT DRIVE
SUITE 1620
JACKSONVILLE, FL 32202 US**FEI Number:** 46-5292832**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THERESA BENNETT PLLC
LAW OFFICE OF THERESA BENNETT
500 SE 17TH STREET SUITE 323
FORT LAUDERDALE, FL 33316 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 HOWELL II, WILLIAM R
Address ONE INDEPENDENT DRIVE, SUITE 1620
City-State-Zip: JACKSONVILLE FL 32202

Title MGR
Name SINGLETARY II, WILLIAM ROSS
Address ONE INDEPENDENT DRIVE, SUITE 1620
City-State-Zip: JACKSONVILLE 32202

Title MGR
Name WALTON III, WILLIAM H
Address ONE INDEPENDENT DRIVE, SUITE 1620
City-State-Zip: JACKSONVILLE FL 32202

Title MGR
Name PROZES, ANDREW
Address ONE INDEPENDENT DR STE 1620
City-State-Zip: JACKSONVILLE FL 32202

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: WILLIAM ROSS SINGLETARY II**MANAGER****04/28/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date