

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000096965

**Entity Name:** 803-805 MAYFAIR, LLC

**Current Principal Place of Business:**

7219 38TH CT. E.  
SARASOTA, FL 34243

**Current Mailing Address:**

5565 POLO RIDGE  
WAUNAKEE, WI 53597 US

**FEI Number:** 47-2515344

**Certificate of Status Desired:** No

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

CROWELL, LAURA  
7219 38TH CT. E.  
SARASOTA, FL 34243 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 CROWELL, LAURA  
Address 7219 38TH CT. E.  
City-State-Zip: SARASOTA FL 34243

Title MANAGER  
Name CROWELL, DAVID  
Address 7219 38TH CT. E.  
City-State-Zip: SARASOTA FL 34243

*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:** LAURA CROWELL

**MANAGER**

**02/06/2019**

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

\_\_\_\_\_  
Date