

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000011895

**Entity Name:** MALORY SQUARE EAST LLC

**Current Principal Place of Business:**

120 S. WOODLAND BLVD.  
200  
DELAND, FL 32720

**FILED**  
**Apr 26, 2022**  
**Secretary of State**  
**0487934427CC**

**Current Mailing Address:**

PO BOX 605  
TRAVELERS REST, SC 29690 US

**FEI Number:** 47-2821394

**Certificate of Status Desired:** No

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

VALENTE, JOE D  
120 S. WOODLAND BLVD.  
SUITE 3  
DELAND, FL 32720 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 SEPE, MARK  
Address 120 EAST RICH AVE  
City-State-Zip: DELAND FL 32724

Title MGR  
Name VALENTE, JOE  
Address 120 S. WOODLAND BLVD.  
City-State-Zip: DELAND FL 32720

Title MGR  
Name DEMPSEY, DONALD B JR  
Address 120 E RICH AVE  
City-State-Zip: DELAND FL 32724

*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:** JOE VALENTE

**MANAGER**

**04/26/2022**

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

\_\_\_\_\_  
Date