

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000058172

**Entity Name:** SOUTHERN HEALTHY HOMES AND BUSINESS LLC

**Current Principal Place of Business:**

3401 SIPSEY ST  
THE VILLAGES, FL 32162

**Current Mailing Address:**

PO BOX 1361  
WILDWOOD, FL 34785 US

**FEI Number:** 47-3690021

**Certificate of Status Desired:** No

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

FILEGAR, HEATHER A  
3401 SIPSEY ST  
THE VILLAGES, FL 32162 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           MANAGER  
Name           THE HEATHER A. FILEGAR TRUST  
Address        PO BOX 1361  
City-State-Zip: WILDWOOD FL 34785

*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:** HEATHER FILEGAR

RA

03/24/2022

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

\_\_\_\_\_ Date