

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000135433

**Entity Name:** MARC HARRIS WILDLIFE LLC

**Current Principal Place of Business:**

4723 NW 36TH AVE  
CAPE CORAL, FL 33993

**Current Mailing Address:**

P.O.BOX 819  
FORT MYERS, FL 33902 US

**FEI Number:** 47-4734316

**Certificate of Status Desired:** No

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

HARRIS, MARC  
4723 NW 36TH AVE  
CAPE CORAL, FL 33993 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	HARRIS, MARC	Name	DRAKE, ALISON
Address	P.O.BOX 819	Address	P.O.BOX 819
City-State-Zip:	FORT MYERS FL 33902	City-State-Zip:	FORT MYERS FL 33902

*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:** ALISON DRAKE

MGR

04/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date