

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000066395

Entity Name: 1325 5TH STREET NAPLES, LLC

Current Principal Place of Business:

4360 BROWNSBORO ROAD
SUITE 101
LOUISVILLE, KY 40207-1642

Current Mailing Address:

4360 BROWNSBORO ROAD
SUITE 101
LOUISVILLE, KY 40207-1642 US

FEI Number: 81-2185301

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: ACCESS WEALTH MANAGEMENT, INC.
Address: 4360 BROWNSBORO ROAD SUITE 101
City-State-Zip: LOUISVILLE KY 40207-1642

Title: MEMBER
Name: CAH III INVESTMENTS
Address: 4360 BROWNSBORO ROAD SUITE 101
City-State-Zip: LOUISVILLE KY 40207-1642

Title: MEMBER
Name: JK REALTY
Address: 4360 BROWNSBORO ROAD SUITE 101
City-State-Zip: LOUISVILLE KY 40207-1642

Title: MEMBER
Name: MULVIHILL, JOE
Address: 4360 BROWNSBORO ROAD SUITE 101
City-State-Zip: LOUISVILLE KY 40207-1642

Title: MEMBER
Name: DIAMOND, MURRAY S
Address: 4360 BROWNSBORO ROAD SUITE 101
City-State-Zip: LOUISVILLE KY 40207-1642

Title: MEMBER
Name: LACHEY, NICK
Address: 4360 BROWNSBORO ROAD SUITE 101
City-State-Zip: LOUISVILLE KY 40207-1642

Title: OTHER
Name: CHRISTENSEN, TONY
Address: 4360 BROWNSBORO ROAD SUITE 101
City-State-Zip: LOUISVILLE KY 40207-1642

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: TONY CHRISTENSEN

AUTHORIZED PERSON

03/02/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date