

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000144758

Entity Name: BENSCHLEY MANOR DEVELOPER, LLC

Current Principal Place of Business:

1105 KENSINGTON PARK DR SUITE 200
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

1105 KENSINGTON PARK DR SUITE 200
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 36-4846692

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RHODEN, REBECCA
215 N EOLA DRIVE
ORLANDO, FL 32801 US

FILED
Apr 24, 2024
Secretary of State
0410916940CC

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: REBECCA RHODEN

04/24/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MBR
Name	WOLF, JONATHAN	Name	BAMBERGER, GLEN
Address	1105 KENSINGTON PARK DR SUITE 200	Address	1105 KENSINGTON PARK DR SUITE 200
City-State-Zip:	ALTAMONTE SPRINGS FL 32714	City-State-Zip:	ALTAMONTE SPRINGS FL 32714
Title	MBR	Title	MBR
Name	VONWELLER, RYAN	Name	WOLF, SARA E
Address	1105 KENSINGTON PARK DR SUITE 200	Address	1105 KENSINGTON PARK DR SUITE 200
City-State-Zip:	ALTAMONTE SPRINGS FL 32714	City-State-Zip:	ALTAMONTE SPRINGS FL 32714
Title	MBR	Title	MGR/AMBR
Name	WOLF, HARRISON F	Name	WOLF, JONATHAN
Address	1105 KENSINGTON PARK DR SUITE 200	Address	1105 KENSINGTON PARK DR SUITE 200
City-State-Zip:	ALTAMONTE SPRINGS FL 32714	City-State-Zip:	ALTAMONTE SPRINGS FL 32714
Title	AMBR	Title	AMBR
Name	WON WELLER, RYAN S	Name	BAMBERGER, GLEN F
Address	1105 KENSINGTON PARK DRIVE, STE 200	Address	1105 KENSINGTON PARK DRIVE. STE 200
City-State-Zip:	ALTAMONTE SPRINGS FL 32714	City-State-Zip:	ALTAMONTE SPRINGS FL 32714

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: JONATHAN L. WOLF

MANAGER

04/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date