

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000165497

Entity Name: MISSION FIELD ENTERPRISES, LLC**Current Principal Place of Business:**5348 VEGAS DR
LAS VEGAS, NV 89108**Current Mailing Address:**5348 VEGAS DR
LAS VEGAS, NV 89108 US**FEI Number:** 26-1099781**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FLOYD, PATRICIA A
13916 BRAMBLE BUSH CT
ORLANDO, FL 32832 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	CARTER, STEVEN B
Address	3360 GLENN MOTTIN WAY SOUTH
City-State-Zip:	JACKSONVILLE FL 32223

Title	MANAGER
Name	CARTER, JONATHAN DAVID
Address	567 SERENADE CIRCLE EAST
City-State-Zip:	JACKSONVILLE BEACH FL 32225

Title	MANAGER
Name	CARTER, JAMES WILLIAM
Address	3360 GLENN MOTTIN WAY SOUTH
City-State-Zip:	JACKSONVILLE FL 32223

Title	MANAGER
Name	CARTER, SYBIL SANTILLAN
Address	3360 GLENN MOTTIN WAY SOUTH
City-State-Zip:	JACKSONVILLE FL 32223

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: STEVEN B. CARTER

MANAGER

01/13/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date