

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000202110

**Entity Name:** LEIGHTON MESSAM LLC

**Current Principal Place of Business:**

1391 NW ST LUCIE WEST BOULEVARD  
#205  
PORT ST LUCIE, FL 34986

**Current Mailing Address:**

PO BOX 880714  
PORT ST LUCIE, FL 34988 US

**FEI Number:** 81-4696137

**Certificate of Status Desired:** No

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

MESSAM, LEIGHTON  
1391 NW ST LUCIE WEST BOULEVARD  
#205  
PORT ST LUCIE, FL 34986 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  
Name MESSAM, LEIGHTON  
Address 1391 NW ST LUCIE WEST  
BOULEVARD  
#205  
City-State-Zip: PORT ST LUCIE FL 34986

*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:** LEIGHTON MESSAM

MBR

03/07/2022

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

\_\_\_\_\_  
Date