

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000218883

**Entity Name:** 1196 PARKWAY, LLC

**Current Principal Place of Business:**

1196 PARKWAY DRIVE  
NAPLES, FL 34104

**Current Mailing Address:**

2024 HARBOR LANE  
NAPLES, FL 34104 US

**FEI Number:** 81-4950702

**Certificate of Status Desired:** No

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

GRABINSKI, MATTHEW L ESQ.  
4001 TAMiami TRAIL N.  
SUITE 300  
NAPLES, FL 34103 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 MCDERMOTT, HEATHER  
Address 2024 HARBOR LANE  
City-State-Zip: NAPLES FL 34104

Title MGR  
Name MCDERMOTT, MATTHEW  
Address 2024 HARBOR LANE  
City-State-Zip: NAPLES FL 34104

Title MGR  
Name HEFFERNAN, PAUL  
Address 225 ISLAND VIEW LANE  
City-State-Zip: GREENPORT NY 11944

Title MGR  
Name HEFFERNAN, JANA  
Address 225 ISLAND VIEW LANE  
City-State-Zip: GREENPORT NY 11944

*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:** JANA HEFFERNAN

**MANAGER**

**01/27/2024**

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

\_\_\_\_\_  
Date