2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000223636

Entity Name: 740780 CARILLON, LLC

Current Principal Place of Business:

880 CARILLON PARKWAY ST. PETERSBURG, FL 33716

Current Mailing Address:

880 CARILLON PARKWAY ST. PETERSBURG. FL 33716 US

FEI Number: 81-4669773 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Apr 17, 2021

Secretary of State

7231348682CC

Authorized Person(s) Detail:

Title **ENTITY MANAGER** Title REGULATORY CONTACT KAMKE, ELLYN A. LACOUR, RAYMOND JR. Name Name 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY Address City-State-Zip: ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716 City-State-Zip:

Title AUTHORIZED ASSOCIATE Title MANAGER

Name LACOUR, RAYMOND JR. Name RAYMOND JAMES & ASSOCIATES,

INC.

Address 880 CARILLON PARKWAY Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Title AUTHORIZE SIGNOR

Name MAZIAD, ELIZABETH J.

Address 880 CARILLON PARKWAY

City-State-Zip: ST. PETERSBURG FL 33716

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: ELIZABETH J. MAZIAD AUTHORIZE SIGNOR 04/17/2021