2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000022947

Entity Name: PROFESSIONAL HOUSING AND LAND LLC

Current Principal Place of Business:

75 N WOODWARD AVE

#81956

TALLAHASSEE, FL 32313

Current Mailing Address:

75 N WOODWARD AVE #81956

TALLAHASSEE, FL 32313 US

FEI Number: 82-1880798 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KENT, JOSEPH 75 N WOODWARD AVE #81956 TALLAHASSEE, FL 32313 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Jan 20, 2020

Secretary of State

8645694168CC

Authorized Person(s) Detail:

Title **MANAGER** Title AUTHORIZED REPRESENTATIVE

KENT, JOSEPH Name Name TERESA, WRIGHT 75 N WOODWARD AVE P.O. BOX 23425 Address Address

#81956

AUTHORIZED REPRESENTATIVE Title Title AUTHORIZED REPRESENTATIVE

City-State-Zip:

BARLING AR 72923

Name TOUSSANT, PEARLETTE Name KENT, MONIKA

Address 75 N WOODWARD AVE Address

75 N WOODWARD AVE #81956

#81956

TALLAHASSEE FL 32313

City-State-Zip: TALLAHASSEE FL 32313 City-State-Zip: TALLAHASSEE FL 32313

Title AUTHORIZED REPRESENTATIVE Title **AUTHORIZED REPRESENTATIVE**

Name SMITH, WILLIAM BAILEY, BRIA Name

Address 5700 LAKE WORTH RD #209-7 75 N WOODWARD AVE Address

LAKE WORTH FL 33463 City-State-Zip: #81956

City-State-Zip: TALLAHASSEE FL 32313

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.

01/20/2020 SIGNATURE: JOSEPH KENT **MANAGER**