

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000038989

Entity Name: HOWIE'S RETREAT, LLC**Current Principal Place of Business:**6989 SEMINOLE BOULEVARD
#6
SEMINOLE, FL 33772**Current Mailing Address:**6989 SEMINOLE BOULEVARD
#6
SEMINOLE, FL 33772**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DOUG BURNS, PA
2559 NURSERY ROAD
SUITE A
CLEARWATER, FL 33764 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 LUCAS, SCOTT
Address 6989 SEMINOLE BLVD UNIT 6
City-State-Zip: SEMINOLE FL 33772

Title MANAGER
Name HEARN, JENNIFER
Address 6989 SEMINOLE BOULEVARD
#6
City-State-Zip: SEMINOLE FL 33772

Title MANAGER
Name GREEN, KEVIN
Address 6989 SEMINOLE BOULEVARD
#6
City-State-Zip: SEMINOLE FL 33772

Title MANAGER
Name LONG, MARK
Address 6989 SEMINOLE BOULEVARD
#6
City-State-Zip: SEMINOLE FL 33772

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: KEVIN GREEN

DIR

05/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date