

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000041231

**Entity Name:** 4720 SE 15TH AVE, LLC

**Current Principal Place of Business:**

1217 CAPE CORAL PARKWAY E  
#114  
CAPE CORAL, FL 33904

**Current Mailing Address:**

1217 CAPE CORAL PARKWAY E  
#114  
CAPE CORAL, FL 33904 US

**FEI Number:** 82-0687646

**Certificate of Status Desired:** No

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

PLF REGISTERED AGENT, L.L.C.  
1833 HENDRY STREET  
FORT MYERS, FL 33907 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	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	LUFT, SAM	Name	POINDEXTER, MARTHA
Address	4720 SE 15TH AVE 101	Address	1217 CAPE CORAL PKWY E 114
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33904

*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:** MARTHA POINDEXTER

**AUTHORIZED MEMBER**

**02/03/2021**

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

\_\_\_\_\_  
Date