

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000125188

**Entity Name:** 921 NO NAME LN, LLC

**Current Principal Place of Business:**

921 NO NAME LANE  
NAPLES, FL 34120

**Current Mailing Address:**

440 20TH AVENUE NE  
NAPLES, FL 34120 US

**FEI Number:** 82-1839456

**Certificate of Status Desired:** No

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

LAW OFFICE OF CONRAD WILLKOMM, P.A.  
3201 TAMIAMI TRL, N, 2ND FLOOR  
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	Title	MGR
Name	CINTRON, JOSE JR.	Name	DE MARIA CINTRON, FLOR
Address	440 20TH AVENUE NE	Address	440 20TH AVENUE NE
City-State-Zip:	NAPLES FL 34120	City-State-Zip:	NAPLES FL 34120

*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:** JOSE CINTRON, JR.

MGR

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date