#### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000178049

Entity Name: SKY CLUB ENTERPRISES LLC

# **Current Principal Place of Business:**

17 ST. JOHNS MEDICAL PARK DRIVE SAINT AUGUSTINE. FL 32086-4331

## **Current Mailing Address:**

17 ST. JOHNS MEDICAL PARK DRIVE SAINT AUGUSTINE. FL 32086-4331 US

FEI Number: 82-2604512 Certificate of Status Desired: No

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

BRODER, TODD 17 ST. JOHNS MEDICAL PARK DRIVE SAINT AUGUSTINE, FL 32086-4331 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** Jan 22, 2024

**Secretary of State** 

5036849847CC

## Authorized Person(s) Detail:

Title MGR

Name BRODER, TODD

17 ST. JOHNS MEDICAL PARK DRIVE Address City-State-Zip: SAINT AUGUSTINE FL 32086-4331

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.