## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000200121

Entity Name: DEL PRADO RETAIL PARTNERS, LLC

**Current Principal Place of Business:** 

1502 B DEL PRADO BLVD. S CAPE CORAL, FL 33990

**Current Mailing Address:** 

1502 B DEL PRADO BLVD, S CAPE CORAL, FL 33990 US

FEI Number: 82-2923614 Certificate of Status Desired: No

**FILED** Mar 07, 2023

**Secretary of State** 

3960180273CC

Date

Name and Address of Current Registered Agent:

MORRELL, DUNCAN 1502 B DEL PRADO BLVD, S CAPE CORAL, FL 33990 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: DUNCAN B MORRELL 03/07/2023

Date Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MGR Title **MBR** 

Name MORRELL, DUNCAN Name STEPHEN, JAMES

7171 PENDALE CIRCLE Address 1502 B DEL PRADO BLVD, S Address

City-State-Zip: NORTH TONAWANDA NY 14120 CAPE CORAL FL 33990 City-State-Zip:

Title **MBR** Title **MBR** 

Name INGLESE, CHRISTOPHER STEPHEN, PAUL Name

Address W 300 N 1602 TIMBER BROOK ROAD Address 9812 MAINSTREET

PEWAUKEE WI 53072 City-State-Zip: City-State-Zip: CLARENCE NY 14130

Title **MBR** Title **MBR** 

Name FREDRICKSON ENTERPRISES, INC. INITUS, INC Name

Address 20376 LARINO LOOP Address 9250 CORKSCREW ROAD, SUITE 13 City-State-Zip: ESTERO FL 33928 ESTERO FL 33928 City-State-Zip:

Title MANAGER

MORRELL, DUNCAN Name

Address 1502 B DEL PRADO BLVD, S CAPE CORAL FL 33990 City-State-Zip:

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.

03/07/2023 SIGNATURE: DUNCAN MORRELL **MANAGER** 

Electronic Signature of Signing Authorized Person(s) Detail