

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000254444

Entity Name: LASTITUSVILLE, LLC

Current Principal Place of Business:

2746 SE EAGLE DRIVE
PORT ST. LUCIE, FL 34984

Current Mailing Address:

POST OFFICE BOX 7997
PORT ST LUCIE, FL 34985 US

FEI Number: 82-5131187

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORMAN, KENNETH A
2400 SE FEDERAL HWY, FOURTH FLOOR
STUART, FL 34995 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 SAMMULI, LYNN A
Address 2746 SE EAGLE DRIVE
City-State-Zip: PORT ST. LUCIE FL 34984

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: LYNN A SAMMULI

MGR

01/08/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date