

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000261928

**Entity Name:** 545 FERN AVE LLC

**Current Principal Place of Business:**

28901 SANDY LANE  
TAVARES FL 32778

**Current Mailing Address:**

28901 SANDY LANE  
TAVARES FL 32778

**FEI Number:** 82-3854672

**Certificate of Status Desired:** No

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

SANFELIPPO, JOHN D  
28901 SANDY LANE  
TAVARES FL 32778 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	SANFELIPPO, JOHN D	Name	SANFELIPPO, AMY M
Address	28901 SANDY LANE	Address	28901 SANDY LANE
City-State-Zip:	TAVARES FL 32778	City-State-Zip:	TAVARES FL 32778

*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:** JOHN SANFELIPPO

**MRG MEMBER**

**02/01/2021**

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

\_\_\_\_\_  
Date