

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000035665

**Entity Name:** CAPTIVA BEACH COTTAGE 1423 LLC

**Current Principal Place of Business:**

548 PINEDALE DRIVE  
ANNAPOLIS, MD 21401

**Current Mailing Address:**

548 PINEDALE DRIVE  
ANNAPOLIS, MD 21401 US

**FEI Number:** 37-1882473

**Certificate of Status Desired:** No

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

SIMMONS LAW FIRM PA  
1633 PERIWINKLE WAY  
SUITE A  
SANIBEL, FL 33957 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 MGRM  
Name HUBBARD, PAGE T  
Address 548 PINEDALE DRIVE  
City-State-Zip: ANNAPOLIS MD 21401

Title MGRM  
Name THIELEMANN, BROOKE  
Address 3923 ST JOHNS LANE  
City-State-Zip: ELLICOTT CITY MD 21042

Title MBR  
Name THIELEMANN, HENRY C  
Address 494 CRUSADER DRIVE  
City-State-Zip: SYKESVILLE MD 21784

Title MBR  
Name THIELEMANN, JAMES S  
Address 124 GREENWOOD CREEK RD  
City-State-Zip: QUEENSTOWN MD 21658

*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:** PAGE T. HUBBARD

**MGRM**

**03/16/2021**

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

\_\_\_\_\_  
Date