

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000060136

**Entity Name:** 96044 COTTAGE COURT, LLC

**Current Principal Place of Business:**

1613 LAKE PARK DR.  
FERNANDINA BEACH, FL 32034

**Current Mailing Address:**

1613 LAKE PARK DR.  
FERNANDINA BEACH, FL 32034

**FEI Number:** 82-4754429

**Certificate of Status Desired:** Yes

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

CRAWFORD, RICHARD A  
1613 LAKE PARK DR.  
FERNANDINA BEACH, FL 32034 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 CRAWFORD, RICHARD A  
Address 1613 LAKE PARK DR.  
City-State-Zip: FERNANDINA BEACH FL 32034

Title MGR  
Name CRAWFORD, KIMBERLY S  
Address 1613 LAKE PARK DR.  
City-State-Zip: FERNANDINA BEACH FL 32034

Title AUTHORIZED MEMBER  
Name CRAWFORD, RICHARD ANDREW II  
Address 7907 VINEYARD LAKE ROAD NORTH  
City-State-Zip: JACKSONVILLE FL 32256

Title AUTHORIZED MEMBER  
Name CRAWFORD, PATRICK MORRIS  
Address 86406 MEADOWWOOD DRIVE  
City-State-Zip: YULEE FL 32097

Title AUTHORIZED MEMBER  
Name CRAWFORD, NICHOLAS SAMUEL  
Address 86433 MEADOWWOOD DRIVE  
City-State-Zip: YULEE FL 32097

*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:** RICHARD ANDREW CRAWFORD

**PRESIDENT**

**01/19/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date