

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000063789

Entity Name: MAUREEN ANDERSON LLC

Current Principal Place of Business:

9900 SUNSET COVE LANE
127
FORT MYERS, FL 33919

Current Mailing Address:

9900 SUNSET COVE LANE
127
FORT MYERS, FL 33919

FEI Number: 82-4816531

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONNOR, PAULA B
4540 COLONY VILLAS DR
1901
BONITA SPRINGS, FL 34134 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 ANDERSON, MAUREEN A
Address 9900 SUNSET COVE LANE
City-State-Zip: FORT MYERS FL 33919

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: MAUREEN ANDERSON

PRESIDENT

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date