

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000092063

**Entity Name:** BELLE ISLE FURNITURE LLC

**Current Principal Place of Business:**

7210 SEMINOLE DR  
APT 1  
ORLANDO, FL 32812

**Current Mailing Address:**

7210 SEMINOLE DR  
APT 1  
ORLANDO, FL 32812 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

LEGALINC CORPORATE SERVICES INC.  
5237 SUMMERLIN COMMONS  
SUITE 400  
FORT MYERS, FL 33907 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 AMBR  
Name BUSWELL, TROY  
Address 7210 SEMINOLE DR  
APT 1  
City-State-Zip: BELLE ISLE FL 32812

Title AMBR  
Name BRANNON, MATT  
Address 7219 LAKE DR  
City-State-Zip: ORLANDO FL 32809

Title CONTROLLER  
Name BRANNON, DEBORAH FORD  
Address 7219 LAKE DR  
City-State-Zip: BELLE ISLE FL 32809

*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:** DEBORAH F BRANNON

**CONTROLLER**

**03/30/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date