

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000166744

**Entity Name:** BENTLEY TIMBER FL LLC

**Current Principal Place of Business:**

111 SECOND AVENUE NE  
STE 517  
SAINT PETERSBURG, FL 33701

**Current Mailing Address:**

111 SECOND AVENUE NE  
STE 517  
SAINT PETERSBURG, FL 33701 US

**FEI Number:** 83-1190825

**Certificate of Status Desired:** No

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

FISHER, DAVID A  
16860 SILVER OAK CIR  
DELRAY BEACH, FL 33445 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           MANAGER  
Name           BRONSON TOWN PROPERTIES LLC  
Address        111 SECOND AVENUE NE  
                  STE 517  
City-State-Zip: SAINT PETERSBURG FL 33701

Title           AMBR  
Name           BRONSON TOWN PROPERTIES LLC  
Address        111 SECOND AVENUE NE  
                  STE 517  
City-State-Zip: SAINT PETERSBURG FL 33701

Title           AMBR  
Name           NC FLORIDA QOZ FUND LLC  
Address        111 SECOND AVENUE NE  
                  STE 517  
City-State-Zip: SAINT PETERSBURG FL 33701

Title           AMBR  
Name           FISHER, DAVID A  
Address        16860 SILVER OAK CIRCLE  
City-State-Zip: DELRAY BEACH FL 33445

Title           AMBR  
Name           FISHER, ANNA E  
Address        16860 SILVER OAK CIRCLE  
City-State-Zip: DELRAY BEACH FL 33445

*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:** KENNETH ORORKE

AMBR

01/29/2023

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

\_\_\_\_\_  
Date