

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000174799

**Entity Name:** CLINE EXECUTIVE SUITES, LLC

**Current Principal Place of Business:**

4076 EAST STATE ROAD 44  
WILDWOOD, FL 34785

**Current Mailing Address:**

4076 EAST STATE ROAD 44  
WILDWOOD, FL 34785 US

**FEI Number: 83-1318002**

**Certificate of Status Desired: No**

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

CLINE, MARK  
4076 EAST STATE ROAD 44  
WILDWOOD, FL 34785 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 CLINE, MARK  
Address 4076 EAST STATE ROAD 44  
City-State-Zip: WILDWOOD FL 34785

Title AMBR  
Name CLINE, LISBETH  
Address 4076 EAST STATE ROAD 44  
City-State-Zip: WILDWOOD FL 34785

Title AMBR  
Name CLINE, ABIGAIL  
Address 4076 EAST STATE ROAD 44  
City-State-Zip: WILDWOOD FL 34785

Title MGR  
Name CLINE ENTERPRISES, INC.  
Address 4076 EAST STATE ROAD 44  
City-State-Zip: WILDWOOD FL 34785

*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: MARK A. CLINE**

**AMBR**

**04/18/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date