# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000259241

Entity Name: 419 SWEETWATER TRAIL LLC

## Current Principal Place of Business:

419 SW SWEETWATER TRL PORT SAINT LUCIE, FL 34953

# **Current Mailing Address:**

89 MEROKE LANE EAST ISLIP, NY 11730 US

## FEI Number: 83-2485288

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

CACOPERDO, PAULETTE 419 SW SWEETWATER TRL PORT SAINT LUCIE, FL 34953 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

## Authorized Person(s) Detail :

Title	MGR
Name	CACOPERDO, PAULETTE
Address	89 MEROKE LANE
City-State-Zip:	EAST ISLIP NY 11730

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: PAULETTE CACOPERDO

MANAGER

03/01/2021 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 01, 2021 Secretary of State 3652968689CC

Certificate of Status Desired: No

Date