2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000265157

Entity Name: HGS TRUST LLC

Current Principal Place of Business:

2390 TAMIAMI TRAIL N STE 204

NAPLES, FL 34103

Current Mailing Address:

2390 TAMIAMI TRAIL N STE 204 NAPLES, FL 34103 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLY, JR, CHARLES M 2390 TAMIAMI TRAIL N STE 204 NAPLES, FL 34103 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:

Date

Title

AMBR

Authorized Person(s) Detail :

Title MGR, AMBR Title AMBR

Electronic Signature of Registered Agent

HOMER G. SCOVILLE MRTL TR FBO Name SCOVILLE, JOHN Name

PATRICIA SCOVILLE 1150 VIA PRIVADA Address

Address 1150 VIA PRIVADA ESCONDIDO CA 92029 City-State-Zip:

ESCONDIDO CA 92029 City-State-Zip:

Title **AMBR**

HOMER G. SCOVILLE TRUST FBO Name Name HOMER G. SCOVILLE RUST FBO JAKE

LESLIE MURPHY **SCOVILLE**

Address 1150 VIA PRIVADA Address 1150 VIA PRIVADA

ESCONDIDO CA 92029 City-State-Zip: City-State-Zip: ESCONDIDO CA 92029

Title **AMBR** Title **AMBR**

HOMER G. SCOVILLE TRUST FBO Name Name HOMER G. SCOVILLE TRUST FBO JOHN HARRIS SCOVILLE

ALEXANDRA SCOVILLE

Address 1150 VIA PRIVADA Address 1150 VIA PRIVADA

City-State-Zip: ESCONDIDO CA 92029 City-State-Zip: ESCONDIDO CA 92029

AMBR Title Title AMBR

SCOVILLE, EMILY Name DIBATTISTA, ARIANE Name Address 1150 VIA PRIVADA Address 1150 VIA PRIVADA

ESCONDIDO CA 92029 City-State-Zip: City-State-Zip: ESCONDIDO CA 92029

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.

02/03/2023 SIGNATURE: JOHN SCOVILLE MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Feb 03, 2023

Secretary of State

9129729016CC