

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000013362

**Entity Name:** 923 COUNTRY CLUB BLVD LLC

**Current Principal Place of Business:**

765 NE 19TH PL  
#2  
CAPE CORAL, FLORIDA 33909

**Current Mailing Address:**

5857 SHADY OAKS LN  
NAPLES, FL 33990 US

**FEI Number:** 83-3232071

**Certificate of Status Desired:** No

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

HEMED, DAVID  
5857 SHADY OAKS LN  
NAPLES, FL 34119 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           | MMBR               | Title           | MMBR               |
| Name            | HEMED, DAVID       | Name            | HEMED, DALIA       |
| Address         | 5857 SHADY OAKS LN | Address         | 5857 SHADY OAKS LN |
| City-State-Zip: | NAPLES FL 34119    | City-State-Zip: | NAPLES FL 34119    |

*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:** DAVID HEMED

MMBR

02/25/2022

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

\_\_\_\_\_  
Date