

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000056297

**Entity Name:** 76-7 ISLA BAHIA, LLC

**Current Principal Place of Business:**

253 WEATHERHILL DRIVE  
WEST CHESTER, PA 19382

**Current Mailing Address:**

PO BOX 220617  
HOLLYWOOD, FL 33022 US

**FEI Number:** 83-3864546

**Certificate of Status Desired:** No

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

WOOD, DOUGLAS  
700 11TH STREET SOUTH  
SUITE 102  
NAPLES, FL 34102 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 MGR  
Name MUNAWAR, FURRUKH  
Address 253 WEATHERHILL DRIVE  
City-State-Zip: WEST CHESTER PA 19382

Title MGR  
Name CORRATO, ROBERT  
Address 38 THORNBIRD WAY  
City-State-Zip: NEWTOWN SQUARE PA 19073

Title MGR  
Name MULLEN, MICHAEL  
Address 450 17TH AVENUE SOUTH  
City-State-Zip: NAPLES FL 34102

Title MGR  
Name WILLIAMS, TROY  
Address 929 SOUTH HIGH STREET #227  
City-State-Zip: WEST CHESTER PA 19382

*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:** MICHAEL MULLEN

MGR

02/03/2021

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

\_\_\_\_\_  
Date