

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000092711

**Entity Name:** SHAMAN ENTERPRISES OF FLORIDA, LLC

**Current Principal Place of Business:**

W-4100 OLD TAMIAMI TRAIL  
OCHOPEE, FL 34141

**Current Mailing Address:**

HC61, W-4100  
OCHOPEE, FL 34141

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

FRANK, STANLEY JR.  
W-4100 OLD TAMIAMI TRAIL  
OCHOPEE, FL 34141 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 FRANK, STANLEY JR  
Address W-4100 OLD TAMIAMI TRAIL  
City-State-Zip: OCHOPEE FL 34141

*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:** STANLEY FRANK

**OWNER/MANAGER**

**06/30/2020**

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

\_\_\_\_\_ Date