

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000097331

**Entity Name:** STILES FAMILY PARTNERSHIP LLC

**Current Principal Place of Business:**

10701 6TH AVE GULF  
MARATHON, FL 33050

**Current Mailing Address:**

PO BOX 522592  
MARATHON SHORES, FL 33052

**FEI Number:** 83-4427787

**Certificate of Status Desired:** No

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

LK FINANCIAL & MANAGEMENT SERVICES INC  
6803 OVERSEAS HWY  
MARATHON, FL 33050 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	MEMB	Title	MEMB
Name	STILES, CHRISTOPHER	Name	STILES, LORI
Address	111 SOLDIERS LANE	Address	111 SOLDIERS LANE
City-State-Zip:	BERRYVILLE VA 22611	City-State-Zip:	BERRYVILLE VA 22611

*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:** CHRISTOPHER STILES

**MEMBER**

**03/17/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date