

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000108949

**Entity Name:** 2308 CORAL POINT DRIVE "MY HAPPY PLACE" LLC

**Current Principal Place of Business:**

7892 E. BERRY VIEW DR.  
STILLMAN VALLEY, IL 61084

**Current Mailing Address:**

7892 E. BERRY VIEW DR.  
STILLMAN VALLEY, IL 61084 US

**FEI Number:** 83-4601383

**Certificate of Status Desired:** No

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

PIERCE, LISA  
2308 CORAL POINT DR.  
CAPE CORAL, FL 33990 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 AMBR  
Name PIERCE, LISA  
Address 7892 E. BERRY VIEW DR.  
City-State-Zip: STILLMAN VALLEY IL 61084

Title AMBR  
Name PIERCE, STEVEN  
Address 7892 E. BERRY VIEW DR.  
City-State-Zip: STILLMAN VALLEY IL 61084

*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:** STEVEN PIERCE

**OWNER**

**03/07/2023**

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

\_\_\_\_\_  
Date