

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000119389

Entity Name: CARTERS PADDOCK LLC**Current Principal Place of Business:**161 HAMPTON POINT DRIVE
SUITE 1
ST AUGUSTINE, FL 32092**Current Mailing Address:**161 HAMPTON POINT DRIVE
SUITE 1
ST AUGUSTINE, FL 32092**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CROZIER, SAMUEL B
161 HAMPTON POINT DRIVE
SUITE 1
ST AUGUSTINE, FL 32092 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	AUTHORIZED MEMBER
Name	CROZIER, SAMUEL B
Address	161 HAMPTON POINT DRIVE, STE 1
City-State-Zip:	ST AUGUSTINE FL 32092

Title	AUTHORIZED MEMBER
Name	PABLO CREEK HOLDING LLC
Address	161 HAMPTON POINT DRIVE, STE 1
City-State-Zip:	ST. AUGUSTINE FL 32092

Title	AUTHORIZED MEMBER
Name	TOWERS, LAWRENCE R
Address	161 HAMPTON POINT DRIVE, STE 1
City-State-Zip:	ST AUGUSTINE FL 32092

Title	MGR
Name	MANN, CHARLIE
Address	161 HAMPTON POINT DRIVE, STE 1
City-State-Zip:	ST AUGUSTINE FL 32092

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: SAMUEL B CROZIER**MEMBER****02/04/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date