

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000135334

**Entity Name:** PIER RIDGE REALTY-JACKSONVILLE, LLC

**Current Principal Place of Business:**

1700 WELLS RD  
SUITE 4  
ORANGE PARK, FL 32073

**Current Mailing Address:**

1700 WELLS RD  
SUITE 4  
ORANGE PARK, FL 32073

**FEI Number:** 84-1930053

**Certificate of Status Desired:** No

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

PENA, TRACIE R  
2341 MAPLE GROVE RD  
JACKSONVILLE, FL 32221 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 PENA, STEVE  
Address 1700 WELLS RD, SUITE 4  
City-State-Zip: ORANGE PARK FL 32073

Title AMBR  
Name PENA, TRACIE R  
Address 1700 WELLS RD, SUITE 4  
City-State-Zip: ORANGE PARK FL 32073

*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:** TRACIE PENA

AMBR

04/17/2020

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

\_\_\_\_\_  
Date