

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000140607

**Entity Name:** FREE 2 LIVE LLC

**Current Principal Place of Business:**

507 AVE A NE  
WINTER HAVEN, FL 33881

**Current Mailing Address:**

507 AVE A NE  
WINTER HAVEN, FL 33881 US

**FEI Number:** 84-3254228

**Certificate of Status Desired:** Yes

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

LIVINGSTON, SHENA M MS.  
507 AVE A NE  
WINTER HAVEN, FL 33881 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            SEC  
Name            WILLIAMS, BRIONI T MS.  
Address        4010 LAKE NED VILLAGE CIR  
City-State-Zip: WINTER HAVEN FL 33884

Title            VP  
Name            BANKS, CRYSTAL MS.  
Address        893 NW 2ND ST  
City-State-Zip: FLORIDA CITY FL 33034

Title            TREASURER  
Name            HALMAN, DEBRA MRS.  
Address        9463 WATERFORD OAKS  
City-State-Zip: WINTER HAVEN FL 33884

Title            PRESIDENT  
Name            LIVINGSTON, SHENA M MS  
Address        507 AVE A NE  
City-State-Zip: WINTER HAVEN FL 33881

*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:** CRYSTAL BANKS

VP

03/15/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date