FEI Num	ber: 84-2677093	Certificate of Status Desired: No		
Name an	d Address of Current Registered	d Agent:		
#415 ORLANDO	ROY-WINDERMERE RD. , FL 32835 US amed entity submits this statement for the purpo	se of changing its registered office or re	gistered agent, or both, in the State of Florida.	
	Electronic Signature of Registered	Agent	Date	
Authoriz	ed Person(s) Detail :			
Title	MGR	Title	AMBR	
Nome	DILL CUCAN	Nama		

ORLANDO, FL 32808 **Current Mailing Address:**

5400 W COLONIAL DR.

DOCUMENT# L19000155883

8815 CONROY-WINDERMERE RD. #415 ORLANDO, FL 32835 US

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Entity Name: 5400 W COLONIAL DRIVE, LLC

Current Principal Place of Business:

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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Title	MGR	Title	AMBR
Name	DILL, SUSAN	Name	CHRISTENSEN FAMILY I, LLC
Address	8815 CONROY-WINDERMERE RD., #415	Address	8815 CONROY-WINDERMERE RD., #415
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835

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.

MANAGER

07/14/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Jul 14, 2022 **Secretary of State** 0275318779CC