

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000218479

**Entity Name:** 3900 NARCISSUS AVENUE, LLC

**Current Principal Place of Business:**

2355 MORNINGSID DRIVE  
MOUNT DORA, FL 32757

**Current Mailing Address:**

2355 MORNINGSID DRIVE  
MOUNT DORA, FL 32757 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CIPPARONE & CIPPARONE, P.A.  
1525 INTERNATIONAL PARKWAY  
1071  
LAKE MARY, FL 32746 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           | MGR                   | Title           | MGR                 |
| Name            | GIRARD, RICHARD A     | Name            | GIRARD, WILLIAM R   |
| Address         | 2355 MORNINGSID DRIVE | Address         | 1284 HAWKSBILL LANE |
| City-State-Zip: | MOUNT DORA FL 32757   | City-State-Zip: | LAKE MARY FL 32746  |

*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:** RICHARD GIRARD

MGR

03/20/2020

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

\_\_\_\_\_  
Date