

**2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L20000005523

**Entity Name:** THE NATIVE LAND COMPANY, LLC

**Current Principal Place of Business:**

THE NATIVE LAND COMPANY, LLC  
1001 RIVERSIDE DRIVE SUITE 1065  
PALMETTO, FL 34221

**Current Mailing Address:**

THE NATIVE LAND COMPANY, LLC  
1001 RIVERSIDE DRIVE SUITE 1065  
PALMETTO, FL 34221 US

**FEI Number:** 84-4220956

**Certificate of Status Desired:** No

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

ALBA, RUSSELL T ESQ  
BLACK SWAN LEGAL COUNSEL, PLLC  
101 SOUTH FRANKLIN STREET SUITE 202  
TAMPA, FL 33602 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  
Name BOLAND, JEFFERY JAMES  
Address P.O. BOX 811  
City-State-Zip: WACISSA FL 32361

Title AUTHORIZED MANAGER  
Name JOHN BOLAND  
Address P.O BOX 173  
City-State-Zip: WACISSA FL 32361

Title AUTHORIZED MANAGER  
Name WILLIAM WOODROFFE  
Address 940 S STERLING AVE  
City-State-Zip: TAMPA FL 33629

Title AUTHORIZED MANAGER  
Name ROSS BLAIR  
Address 11928 73RD STREET EAST  
City-State-Zip: PARRISH FL 34219

*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:** RUSSELL T. ALBA, ESQUIRE

**ATTORNEY-IN-FACT**

**05/17/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date