

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000036463

**Entity Name:** ALLISONS BEACH HOUSE LLC

**Current Principal Place of Business:**

280 NORTH COUNTRY CLUB BLVD  
BOCA RATON, FL 33487

**Current Mailing Address:**

280 NORTH COUNTRY CLUB BLVD  
BOCA RATON, FL 33487 US

**FEI Number:** 45-2658675

**Certificate of Status Desired:** No

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

GRIEK, ALLISON  
280 NORTH COUNTRY CLUB BLVD  
BOCA RATON, FL 33487 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 GRIEK, ALLISON  
Address 280 NORTH COUNTRY CLUB BLVD  
City-State-Zip: BOCA RATON FL 33487

Title AMBR  
Name GRIEK, CHRISTOPHER  
Address 280 NORTH COUNTRY CLUB BLVD  
City-State-Zip: BOCA RATON FL 33487

*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:** ALLISON M GRIEK

**OFFICER**

**01/26/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date