

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000048858

**Entity Name:** 610 CLUB MARCO CIRCLE UNIT 201, LLC

**Current Principal Place of Business:**

610 CLUB MARCO CIRCLE  
UNIT 201  
MARCO ISLAND, FL 34145

**Current Mailing Address:**

20 DAWSON DRIVE  
NEEDHAM, MA 02492 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

WEBSTER, RONALD S  
800 N. COLLIER BLVD.  
#203  
MARCO ISLAND, FL 34145 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 MURPHY, THOMAS J  
Address 20 DAWSON DRIVE  
City-State-Zip: NEEDHAM MA 02492

Title MGR  
Name MURPHY, ELLEN B  
Address 20 DAWSON DRIVE  
City-State-Zip: NEEDHAM MA 02492

Title AMBR  
Name THOMAS J. MURPHY REVOCABLE TRUST  
Address 20 DAWSON DRIVE  
City-State-Zip: NEEDHAM MA 02492

Title AMBR  
Name ELLEN B. MURPHY REVOCABLE TRUST  
Address 20 DAWSON DRIVE  
City-State-Zip: NEEDHAM MA 02492

Title MGR  
Name MURPHY, THOMAS J. JR.  
Address 21 SPARHAWK DR.  
City-State-Zip: BURLINGTON MA 01803

Title MGR  
Name MURPHY, CHERYL A  
Address 21 SPARHAWK DR.  
City-State-Zip: BURLINGTON MA 01803

*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:** ELLEN MURPHY

AMBR

01/19/2023

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

\_\_\_\_\_  
Date