

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000051429

**Entity Name:** LC HOMES GROUP, LLC

**Current Principal Place of Business:**

1101 MIRANDA LANE  
SUITE 130  
KISSIMMEE, FL 34741

**Current Mailing Address:**

1101 MIRANDA LANE  
SUITE 130  
KISSIMMEE, FL 34741 US

**FEI Number:** 84-4835534

**Certificate of Status Desired:** No

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

LOPEZ, CARLOS A  
9402 KOMIKA LN  
WINTER GARDEN, FL 34787 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 AMBR  
Name LOPEZ, CLAUDIA J  
Address 9402 KOMIKA LN  
City-State-Zip: WINTER GARDEN FL 34787

Title AMBR  
Name CARDENAS, ELENA M  
Address 4596 STOREYTELLING WAY  
City-State-Zip: KISSIMMEE FL 34746

Title AMBR  
Name CARDENAS, ARTURO E  
Address 4596 STOREYTELLING WAY  
City-State-Zip: KISSIMMEE FL 34746

Title AMBR  
Name LOPEZ, CARLOS A  
Address 9402 KOMIKA LN  
City-State-Zip: WINTER GARDEN FL 34787

*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:** CLAUDIA J LOPEZ

AMBR

04/30/2023

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

\_\_\_\_\_  
Date