

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000106610

**Entity Name:** 526 PORTER LANE, LLC

**Current Principal Place of Business:**

526 PORTER LN.  
KEY WEST, FL 33040

**Current Mailing Address:**

378 BENTLEYVILLE RD.  
CHAGRIN FALLS, OH 44022 US

**FEI Number:** 85-1145896

**Certificate of Status Desired:** No

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

OROPEZA, GREGORY S ESQ.  
221 SIMONTON ST.  
KEY WEST, FL 33040 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            WILK, GRANT  
Address        378 BENTLEYVILLE RD.  
City-State-Zip: CHAGRIN FALLS OH 44022

*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:** GRANT WILK

**PRESIDENT**

**01/11/2024**

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

\_\_\_\_\_  
Date