

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000305368

**Entity Name:** MISSION DISCOUNT CARDS LLC

**Current Principal Place of Business:**

184 CIRCUIT RIDER ROAD  
GREEN COVE SPRINGS, FL 32043

**Current Mailing Address:**

PO BOX 66403  
ORANGE PARK, FL 32065 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

HINSON, WENDY L  
234 EVENTIDE DR.  
FLEMING ISLAND, FL 32003 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 PD  
Name NEAL, GREGORY  
Address 184 CIRCUIT RIDER ROAD  
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title AP  
Name HINSON, WENDY  
Address 234 EVENTIDE DR.  
City-State-Zip: FLEMING ISLAND FL 32003

*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:** WENDY L HINSON

AR

04/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date