

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000360283

**Entity Name:** PNL FAMILY LLC

**Current Principal Place of Business:**

155 NORTH SPRING TRAIL  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

155 NORTH SPRING TRAIL  
ALTAMONTE SPRINGS, FL 32714 US

**FEI Number:** 85-3374944

**Certificate of Status Desired:** No

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

LALCHANDANI, MARY R  
155 NORTH SPRING TRAIL  
ALTAMONTE SPRINGS, FL 32714 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 LALCHANDANI, PATRICK N  
Address 155 NORTH SPRING TRAIL  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title MGR  
Name LALCHANDANI, MARY  
Address 155 NORTH SPRING TRAIL  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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:** MARY LALCHANDANI

**REGISTERD AGENT**

**01/26/2022**

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

\_\_\_\_\_  
Date