

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000057033

**Entity Name:** NEG FOTO A LLC

**Current Principal Place of Business:**

7049 PROSPERITY PARK ROAD EAST  
JACKSONVILLE, FL 32244

**Current Mailing Address:**

7049 PROSPERITY PARK ROAD EAST  
JACKSONVILLE, FL 32244 US

**FEI Number:** 86-2086721

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC.  
7901 4TH STREET NORTH  
STE 300  
ST. PETERSBURG, FL 33702 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 NOEL, WISTHNEITHER  
Address 7049 PROSPERITY PARK RD E  
City-State-Zip: JACKSONVILLE FL 32244

Title MGRM  
Name EXANTUS, DUCHENEL  
Address 7049 PROSPERITY PARK RD E  
City-State-Zip: JACKSONVILLE FL 32244

Title AMBR  
Name MEDINA, LYSE F  
Address 5541 OLIVER STREET NORTH  
City-State-Zip: JACKSONVILLE FL 32211

Title AMBR  
Name LAURORE, WILBERT  
Address 5234 NORTH ORANGE BLOSSOM  
TRAIL  
City-State-Zip: ORLANDO FL 32810

*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:** DUCHENEL EXANTUS

04/28/2022

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

\_\_\_\_\_  
Date