

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000158288

**Entity Name:** 50 CENTS INVESTMENT CLUB LLC**Current Principal Place of Business:**623 DEL PILAR DRIVE  
GROVELAND, FL 34736**Current Mailing Address:**623 DEL PILAR DRIVE  
GROVELAND, FL 34736**FEI Number:** 86-3059232**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOSEPH, LUTES  
623 DEL PILAR DR  
GROVELAND, FL 34736 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	JOSEPH, LUTES
Address	623 DEL PILAR DR
City-State-Zip:	GROVELAND FL 34736
Title	SEC
Name	CLAUDIA, ALCIUS
Address	232 S ORANGE BLOSSOM TRAILS
City-State-Zip:	ORLANDO FL 34736
Title	AA
Name	GEROME, JULES
Address	6034 BROOKHILL CT
City-State-Zip:	ORLANDO FL 32810

Title	AP
Name	NOEL, NATACHA
Address	5240 N PINE HILLS RD
City-State-Zip:	ORLANDO FL 32808
Title	AA
Name	JOSEPH, ANTONIO
Address	7758 DRYDEN WAY
City-State-Zip:	ORLANDO FL 32814

*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:** LUTES JOSEPH

MGR

03/09/2022

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