

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000226201

**Entity Name:** 1049 WILLA SPRINGS, LLC

**Current Principal Place of Business:**

619 WHITE CRANE CT  
CHULUOTA, FL 32766

**Current Mailing Address:**

619 WHITE CRANE CT  
CHULUOTA, FL 32766 UN

**FEI Number:** 86-3943488

**Certificate of Status Desired:** No

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

PILIA, CARLO  
619 WHITE CRANE CT  
CHULUOTA, FL 32766 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	Title	AUTHORIZED MEMBER
Name	CHITTALURU, PRASAD V	Name	PILIA, CARLO
Address	270 LAKE DRIVE	Address	619 WHITE CRANE CT
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	CHULUOTA FL 32766

*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:** PILIA , CARLO

**MEMBER**

**03/22/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date