

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000242519

**Entity Name:** 421 KINGSLEY, LLC

**Current Principal Place of Business:**

421 KINGSLEY AVENUE, BLDG 200  
ORANGE PARK, FL 32073

**Current Mailing Address:**

421 KINGSLEY AVENUE, BLDG 200  
ORANGE PARK, FL 32073 US

**FEI Number:** 59-3666195

**Certificate of Status Desired:** No

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

COLEMAN, C. RANDOLPH  
5011 GATE PARKWAY, BLDG 100, STE 100  
JACKSONVILLE, FL 32256 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                          | Title           | AMBR                          |
| Name            | WEISS, ERIC A M.D.            | Name            | WEISS, CHRISTINE              |
| Address         | 421 KINGSLEY AVENUE, BLDG 200 | Address         | 421 KINGSLEY AVENUE, BLDG 200 |
| City-State-Zip: | ORANGE PARK FL 32073          | City-State-Zip: | ORANGE PARK FL 32073          |

*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:** ERIC A WEISS

AMBR

04/06/2022

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

\_\_\_\_\_  
Date