

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000261101

**Entity Name:** NORTH LAGOON PROPERTIES, LLC

**Current Principal Place of Business:**

4440 VISTA LANE  
LYNN HAVEN, FL 32444

**Current Mailing Address:**

4440 VISTA LANE  
LYNN HAVEN, FL 32444 US

**FEI Number:** 87-1106854

**Certificate of Status Desired:** No

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

JACQUEMIN, JOSEPH  
4440 VISTA LANE  
LYNN HAVEN, FL 32444 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	AMBR
Name	JACQUEMIN, JOSEPH	Name	JACQUEMIN, LEANNE
Address	4440 VISTA LANE	Address	4440 VISTA LANE
City-State-Zip:	LYNN HAVEN FL 32444	City-State-Zip:	LYNN HAVEN FL 32444

*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:** JOSEPH JACQUEMIN

**OWNER**

**02/09/2024**

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

\_\_\_\_\_  
Date