

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000281847

**Entity Name:** 1023 SR 20, LLC

**Current Principal Place of Business:**

1023 SR 20  
INTERLACHEN, FL 32140

**Current Mailing Address:**

P.O. BOX 2021  
INTERLACHEN, FL 32148 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

DUFEK, BARRY M  
112 MILLER SQUARE  
INTERLACHEN, FL 32148 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            DUFEK, BARRY M  
Address        112 MILLER SQUARE  
City-State-Zip: INTERLACHEN FL 32148

*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:** BARRY DUFEK

**PRESIDENT**

**04/25/2022**

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

\_\_\_\_\_  
Date