

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000384374

**Entity Name:** 545 GLENRIDGE ROAD LLC

**Current Principal Place of Business:**

545 GLENRIDGE ROAD  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

545 GLENRIDGE ROAD  
KEY BISCAYNE, FL 33149 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

LEE C. SCHMACHTENBERG P.A.  
730 S COLLIER BLVD  
SUITE 1001  
MARCO ISLAND, FL 34145 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 GONZALES DORIA MEDINA, MARIA  
ALEJANDRA  
Address 545 GLENRIDGE ROAD  
City-State-Zip: KEY BISCAYNE FL 33149

*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:** MARIA ALEJANDRA GONZALES DORIA MEDINA

**MANAGER**

**03/06/2024**

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

\_\_\_\_\_  
Date