

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000398796

Entity Name: WYCLIFFE COMMUNITY REALTY, LLC**Current Principal Place of Business:**4650 WYCLIFFE COUNTRY CLUB BLVD.
WELLINGTON, FL 33449**Current Mailing Address:**4650 WYCLIFFE COUNTRY CLUB BLVD.
WELLINGTON, FL 33449 US**FEI Number:** 87-2624813**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SACHS SAX CAPLAN, PL
6111 BROKEN SOUND PKWY
SUITE 200
BOCA RATON, FL 33487 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 WYCLIFFE GOLF AND COUNTRY CLUB HOA, INC.
Address 4650 WYCLIFFE COUNTRY CLUB BLVD.
City-State-Zip: WELLINGTON FL 33449

Title AMBR
Name JEWELL, ALEXANDER
Address 4650 WYCLIFFE COUNTRY CLUB BLVD.
City-State-Zip: WELLINGTON FL 33449

Title MGR
Name MARTIN, ROBERT
Address 4650 WYCLIFFE COUNTRY CLUB BLVD.
City-State-Zip: WELLINGTON FL 33449

Title AMBR
Name BARTA, SHANE
Address 4650 WYCLIFFE COUNTRY CLUB BLVD.
City-State-Zip: WELLINGTON FL 33449

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: ROBERT MARTIN

MANAGER

04/01/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date