

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000495688

**Entity Name:** REEL REELTY, LLC

**Current Principal Place of Business:**

226 OLEANDER AVENUE APT LWR  
PALM BEACH, FL 33480

**Current Mailing Address:**

226 OLEANDER AVENUE APT LWR  
PALM BEACH, FL 33480

**FEI Number:** 87-3711303

**Certificate of Status Desired:** No

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

CHILTON, CHARLES R  
99 SIXTH STREET, S.W.  
WINTER HAVEN, FL 33880 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           | MBR                         | Title           | MBR                         |
| Name            | WATKINS, COLE B             | Name            | JACQUELINE ANNE GULLA       |
| Address         | 226 OLEANDER AVENUE APT LWR | Address         | 226 OLEANDER AVENUE APT LWR |
| City-State-Zip: | PALM BEACH FL 33480         | City-State-Zip: | PALM BEACH FL 33480         |

*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:** COLE WATKINS

**MEMBER**

**01/31/2023**

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

\_\_\_\_\_  
Date