

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000503177

**Entity Name:** NATURE COAST CRUISERS LLC

**Current Principal Place of Business:**

1153 SE 2ND ST  
CRYSTAL RIVER, FL 34429

**Current Mailing Address:**

1153 SE 2ND ST  
CRYSTAL RIVER, FL 34429 US

**FEI Number:** 87-3743731

**Certificate of Status Desired:** No

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

DAQUANNA, KELLY R  
1153 SE 2ND ST  
CRYSTAL RIVER, FL 34429 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	PRESIDENT	Title	PRES
Name	DAQUANNA, KELLY R	Name	DAQUANNA, KYLE R
Address	1153 SE 2ND ST	Address	2136 W LEEWYNN DR
City-State-Zip:	CRYSTAL RIVER FL 34429	City-State-Zip:	SARASOTA FL 34240

*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:** KELLY R DAQUANNA

**PRESIDENT**

**02/07/2024**

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

\_\_\_\_\_  
Date