

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000092173

**Entity Name:** 716 MEDINA CT, LLC

**Current Principal Place of Business:**

691 RIDGEFIELD ROAD  
WILTON, CT 06897

**Current Mailing Address:**

691 RIDGEFIELD ROAD  
WILTON, CT 06897

**FEI Number: 88-1234738**

**Certificate of Status Desired:** No

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

ROMANELLO GOODE PL  
320 1ST STREET NORTH  
SUITE 613  
JACKSONVILLE BEACH, FL 32250 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 FULTON, GARLAND W  
Address 691 RIDGEFIELD ROAD  
City-State-Zip: WILTON CT 06897

*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:** GARLAND WILLIAM FULTON

MGR

03/13/2023

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

\_\_\_\_\_ Date