

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000430851

**Entity Name:** 918 S JOY LLC

**Current Principal Place of Business:**

918 S JOY CIRCLE  
MARCO ISLAND, FL 34145

**Current Mailing Address:**

527 GENERAL ARMSTRONG RD  
KING OF PRUSSIA, PA 19406 UN

**FEI Number:** 92-0684372

**Certificate of Status Desired:** No

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

DOAN, NICHOLAS  
918 S JOY CIRCLE  
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 AMBR  
Name DOAN, NICHOLAS  
Address 527 GENERAL ARMSTRONG RD  
City-State-Zip: KING OF PRUSSIA PA 19406

Title AMBR  
Name DOAN, SCOTT  
Address 1800 HONDURAS AVENUE  
City-State-Zip: MARCO ISLAND FL 34145

Title AMBR  
Name DOAN, CHINH N  
Address 15911 GREYSTONE ROAD  
City-State-Zip: POWAY CA 92064

Title AMBR  
Name PHAM, THI THI T  
Address 527 GENERAL ARMSTRONG RD  
City-State-Zip: KING OF PRUSSIA PA 19406

*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:** NICHOLAS DOAN

01/10/2024

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

\_\_\_\_\_  
Date