

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000453912

**Entity Name:** WATER'S EDGE ESCAPES LLC

**Current Principal Place of Business:**

6137 WALTON ST  
PENSACOLA, FL 32503

**Current Mailing Address:**

6137 WALTON ST  
PENSACOLA, FL 32503

**FEI Number:** 92-0775589

**Certificate of Status Desired:** No

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

STONE, KRYSTAL  
10203B HOLSBERRY RD  
PENSACOLA, FL 32534 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	Title	MANAGER
Name	STONE, KRYSTAL	Name	STONE, JACOB
Address	10203B HOLSBERRY RD	Address	10203 HOLSBERRY ROAD
City-State-Zip:	PENSACOLA FL 32534	City-State-Zip:	PENSACOLA FL 32534

*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:** STONE, KRYSTAL

**MANAGER**

**05/01/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date