

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000036602

Entity Name: COMMUNITY 2445 LLC

Current Principal Place of Business:

2445 COMMUNITY ROAD
JACKSONVILLE, FL 32207

Current Mailing Address:

2862 CYPRESSVIEW CT
KISSIMMEE, FL 34746

FEI Number: 92-1999570

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUARTE-MAIA, CYNTHIA N
2862 CYPRESSVIEW CT
KISSIMMEE, FL 34746 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 DUARTE-MAIA, CYNTHIA N
Address 2862 CYPRESSVIEW CT
City-State-Zip: KISSIMMEE FL 34746

Title MGR
Name MAIA, EMERIO B JR
Address 2862 CYPRESSVIEW CT
City-State-Zip: KISSIMMEE FL 34746

Title MGR
Name DUARTE, PEDRO N
Address 2445 COMMUNITY RD
City-State-Zip: JACKSONVILLE FL 32207

Title MGR
Name GAZARINI, RHEINA B
Address 2445 COMMUNITY RD
City-State-Zip: JACKSONVILLE FL 32207

Title MGR
Name DUARTE, LUIZ H
Address 230 HOYT ST
City-State-Zip: KEARNY NJ 07032

Title MGR
Name DUARTE, SOLANGE P
Address 230 HOYT ST
City-State-Zip: KEARNY NJ 07032

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: CYNTHIA DUARTE-MAIA

PARTNER

03/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date