

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000397539

Entity Name: 4175 LAKEWOOD LLC

Current Principal Place of Business:

9400 FOUNTAIN MEDICAL CT SUITE B-100
BONITA SPRINGS, FL 34135

Current Mailing Address:

9400 FOUNTAIN MEDICAL CT SUITE B-100
BONITA SPRINGS, FL 34135 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLEATCO HOLDINGS LLC
9400 FOUNTAIN MEDICAL CT SUITE B-100
BONITA SPRINGS, FL 34135 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 FLEATCO HOLDINGS LLC
Address 9400 FOUNTAIN MEDICAL CT SUITE B-100
City-State-Zip: BONITA SPRINGS FL 34135

Title MGR
Name NACE COHEN, CPA
Address 9400 FOUNTAIN MEDICAL CT SUITE B-100
City-State-Zip: BONITA SPRINGS FL 34135

Title MGR
Name ELORANTO, MICHAEL
Address 9400 FOUNTAIN MEDICAL CT SUITE B-100
City-State-Zip: BONITA SPRINGS FL 34135

Title MGR
Name FERNSTROM, CARL
Address 9400 FOUNTAIN MEDICAL CT SUITE B-100
City-State-Zip: BONITA SPRINGS FL 34135

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: MICHAEL ELORANTO

MGR

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date