

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000004549

**Entity Name:** SPRING HILL PDT-SH LLC

**Current Principal Place of Business:**

3030 STARKEY BLVD  
TRINITY, FL 34655

**Current Mailing Address:**

3030 STARKEY BLVD  
TRINITY, FL 34655 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ZIELINSKI, KRYSZTOF  
3030 STARKEY BLVD  
TRINITY, FL 34655 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 MGRM  
Name ZIELINSKI, KRYSZTOF  
Address 3030 STARKEY BLVD  
City-State-Zip: TRINITY FL 34655

Title MGRM  
Name GOTTSACKER, PAUL  
Address 909 N 8TH STREET, SUITE 110  
City-State-Zip: SHEBOYGAN WI 53081

Title MGRM  
Name SCHAFFER, THOMAS  
Address 2551 N. WAHL AVE  
City-State-Zip: MILWAUKEE WI 53211

Title MBR  
Name ZABEL, DEREK  
Address 3030 STARKEY BLVD  
City-State-Zip: TRINITY FL 34655

*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:** THOMAS SCHAFFER

**MANAGER**

**01/23/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date