

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000066535

**Entity Name:** E & J ASSOCIATES LLC**Current Principal Place of Business:**9226 SHADOW OAK LANE  
NAPLES, FL 34120**Current Mailing Address:**9226 SHADOW OAK LANE  
NAPLES, FL 34120 US**FEI Number:** 34-2015134**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PAVIA, ALFRED  
3776 NW 9TH STREET  
NAPLES  
DELRAY BEACH, FL 33445 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	BISOGNO, JODI M
Address	9226 SHADOW OAK LANE
City-State-Zip:	NAPLES FL 34120

Title	MGRM
Name	BISOGNO, ELLEN J
Address	4740 FORMOSA DRIVE
City-State-Zip:	NAPLES FL 34119

Title	AUTHORIZED MEMBER
Name	MCCURDY, DUSTIN
Address	9226 SHADOW OAK LANE
City-State-Zip:	NAPLES FL 34120

Title	AUTHORIZED MEMBER, AUTHORIZED REPRESENTATIVE
Name	TINT CONNECTION 2
Address	9226 SHADOW OAK LANE
City-State-Zip:	NAPLES FL 34120

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:** JODI BISOGNO

MANGER

04/12/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date