

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000029303

**Entity Name:** TOPHET-BLYTH LLC**Current Principal Place of Business:**1415 PANTHER LANE  
SUITE 402  
NAPLES, FL 34109**Current Mailing Address:**1415 PANTHER LANE  
SUITE 402  
NAPLES, FL 34109**FEI Number:** 26-2270868**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAC ALPINE, KENNETH D  
1415 PANTHER LANE  
SUITE 402  
NAPLES, FL 34109 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 MAC ALPINE, KENNETH D  
Address 1415 PANTHER LANE SUITE 402  
City-State-Zip: NAPLES FL 34109

Title MGR  
Name PEARS, DENISE A  
Address 1415 PANTHER LANE SUITE 402  
City-State-Zip: NAPES FL 34109

Title MGR  
Name SHEPHERD, PATRICIA A  
Address 1415 PANTHER LANE SUITE 402  
City-State-Zip: NAPLES FL 34109

Title MGR  
Name MAC ALPINE, KENNETH L  
Address 9122 ASTONIA WAY  
City-State-Zip: FT. MYERS FL 33967

Title MGR  
Name BLYTH, NICKY  
Address 1415 PANTHER LANE  
SUITE 402  
City-State-Zip: NAPLES FL 34109

Title MGR  
Name MACALPINE, MARYANN F  
Address 1415 PANTHER LANE  
SUITE 402  
City-State-Zip: NAPLES FL 34109

*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:** KENNETH D MACALPINE

MGRM

03/25/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date