

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000001299

**Entity Name:** LYONS TITLE & TRUST, LLC

**Current Principal Place of Business:**

27911 CROWN LAKE BLVD.  
SUITE 205  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

27911 CROWN LAKE BLVD.  
SUITE 205  
BONITA SPRINGS, FL 34135 US

**FEI Number:** 26-3972427

**Certificate of Status Desired:** No

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

L&L PARA, LTD. CO.  
27911 CROWN LAKE BLVD.  
SUITE 209  
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           MANAGER  
Name           LYONS, RICHARD D  
Address        27911 CROWN LAKE BLVD.  
                  SUITE 201  
City-State-Zip: BONITA SPRINGS FL 34135

Title           VP  
Name           SANSON, TRISH  
Address        27911 CROWN LAKE BOULEVARD  
                  SUITE 205  
City-State-Zip: BONITA SPRINGS FL 34135

Title           PRESIDENT  
Name           LYONS, JOEL D.  
Address        27911 CROWN LAKE BOULEVARD  
                  SUITE 205  
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:** RICHARD D LYONS

**MANAGER**

**03/03/2024**

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

\_\_\_\_\_  
Date