2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 09, 2024
Secretary of State
7332343132CC

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Entity Name: CONNER RETREAT, LLC

Current Principal Place of Business:

847 BURLINGTON AVE.
ST. PETERSBURG , FL 33701

Current Mailing Address:

P.O. BOX 192
BLUE RIDGE, GA 30513 US

FEI Number: 27-1332055

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORMAN, CHRISTOPHER HRDQ
HONES NORMAN HINES, P.L.
315 S HYDE PARK AVE
TAMPA, FL 33606 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	MR	Title	MRS.
Name	CONNER, JOHN S	Name	CONNER, MARGARET S
Address	P.O. BOX 192	Address	P.O. BOX 192
City-State-Zip:	BLUE RIDGE GA 30513	City-State-Zip:	BLUE RIDGE GA 30513

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: JOHN S CONNER MANAGER 02/09/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date