## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000121144

Entity Name: SUMMERSIDE, LLC

**Current Principal Place of Business:** 

6701 AMARYLLIS DRIVE

**BOX 7853** 

INDIAN LAKE ESTATES, FL 33855

**Current Mailing Address:** 

**BOX 7853** 

INDIAN LAKE ESTATES, FL 33855 US

FEI Number: 80-0520542 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

APRIL, O. JOSEPH BOX 7853 INDIAN LAKE ESTATES, FL 33855 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

**FILED** Jan 14, 2022

**Secretary of State** 

8164094526CC

Authorized Person(s) Detail:

Title **MGRM** Title **MGRM** 

APRIL, JUDITH APRIL. O. JOSEPH Name Name

Address **BOX 7853** Address **BOX 7853** 

INDIAN LAKE ESTATES FL 33855 City-State-Zip: City-State-Zip: INDIAN LAKE ESTATES FL 33855

Title MGRM

Name APRIL, ERIC J

Address 9419 OAK STREET City-State-Zip: RIVERVIEW FL 33569

SIGNATURE: O. JOSEPH APRIL

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.

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

01/14/2022

Date