

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000119634

Entity Name: CONNOR AND GASKINS UNLIMITED, LLC**Current Principal Place of Business:**1998 TRADE CENTER WAY
SUITE 2
NAPLES, FL 34109**Current Mailing Address:**1998 TRADE CENTER WAY
SUITE 2
NAPLES, FL 34109 US**FEI Number:** 27-4242843**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEBEAU, CAROL L
4953 CASTELLO DRIVE
SUITE 200 SUITE 104
NAPLES, FL 34103 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	MGR
Name	CONNOR, BARRY
Address	1998 TRADE CENTER WAY SUITE 2
City-State-Zip:	NAPLES FL 34109

Title	MGR
Name	GASKINS, CRAIG E
Address	1998 TRADE CENTER WAY SUITE 2
City-State-Zip:	NAPLES FL 34109

Title	AMBR
Name	LUDINGTON, MICHAEL
Address	1140 RORDON AVE
City-State-Zip:	NAPLES FL 34103

Title	AMBR
Name	TWENTAN, CLIFFORD A
Address	6140 HIDDEN OAKS LANE
City-State-Zip:	NAPLES FL 34119

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: CRAIG GASKINS

MGR

02/06/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date