

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000078565

**Entity Name:** BARBARA CONNOLLY ASSOCIATES LLC

**Current Principal Place of Business:**

2805 N. A1A HIGHWAY  
SUITE 504  
INDIALANTIC, FL 32903

**Current Mailing Address:**

477 SPOONBILL LANE  
INDIALANTIC, FL 32951 US

**FEI Number:** 45-2721129

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
5575 S. SEMORAN BLVD  
SUITE 36  
ORLANDO, FL 32822 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 CONNOLLY, BARBARA H DR.  
Address 2805 N. A1A HIGHWAY SUITE 504  
City-State-Zip: INDIALANTIC FL 32903

Title MGRM  
Name CONNOLLY, MICHAEL J  
Address 2805 N. A1A HIGHWAY SUITE 504  
City-State-Zip: INDIALANTIC FL 32903

*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:** BARBARA H. CONNOLLY

**PRESIDENT**

**02/04/2020**

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

\_\_\_\_\_  
Date