

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000126315

Entity Name: ANAM PARC, LLC**Current Principal Place of Business:**3604 CARDINAL POINT DRIVE
JACKSONVILLE, FL 32257**Current Mailing Address:**6484 N COUNTY RD 1320 E
CHARLESTON, IL 61920 US**FEI Number:** 45-3748578**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GLAVICH, JAMIE
3604 CARDINAL POINT DRIVE
JACKSONVILLE, FL 32257 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:** JAMIE GLAVICH

01/27/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name JASON R. GOWIN REV TRUST U/A
DTD 8/27/09
Address 6484 N COUNTY RD 1320 E
City-State-Zip: CHARLESTON IL 61920

Title MGRM
Name THERESA S. GOWIN REV TRUST U/A
DTD 8/27/09
Address 6484 N COUNTY RD 1320 E
City-State-Zip: CHARLESTON IL 61920

Title MGRM
Name MARINELLI, BERNICE
Address 7431 E STATE ST #253
City-State-Zip: ROCKFORD IL 61108

Title MGRM
Name GAINES, STUART
Address 7431 E STATE ST #253
City-State-Zip: ROCKFORD IL 61108

Title MGRM
Name GLAVICH, JAMIE
Address 3604 CARDINAL POINT DR
City-State-Zip: JACKSONVILLE FL 32257

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: JASON R GOWIN

MEMBER

01/27/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date