

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000139328

Entity Name: 110 N. MACDILL AVENUE, LLC**Current Principal Place of Business:**4203 W CULBREATH AVE
TAMPA, FL 33609**Current Mailing Address:**4203 W. CULBREATH AVENUE
TAMPA, FL 33609 US**FEI Number:** 45-4015409**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COHEN, ROBERT
4203 W. CULBREATH AVENUE
TAMPA, FL 33609 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	COHEN, ROBERT
Address	4203 W. CULBREATH AVENUE
City-State-Zip:	TAMPA FL 33609

Title	MGRM
Name	COHEN, CHRISTINE
Address	4203 W. CULBREATH AVENUE
City-State-Zip:	TAMPA FL 33609

Title	MGRM
Name	CHRISTINE COHEN TBTE, ROBERT AND
Address	4203 W. CULBREATH AVENUE
City-State-Zip:	TAMPA FL 33609

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: ROBERT COHEN

MGRM

03/06/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date