

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000026788

Entity Name: CARNOUSTIE #2358, LLC**Current Principal Place of Business:**36750 US HIGHWAY 19 NORTH
#2350
PALM HARBOR, FL 34684**Current Mailing Address:**36750 US HIGHWAY 19 NORTH
#2350
PALM HARBOR, FL 34684 US**FEI Number:** 99-0385202**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ELLIOTT, HERBERT
1111 RIVERSIDE DRIVE
TARPON SPRINGS, FL 34689 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:** ELLIOTT, HERBERT

07/20/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM
Name	MATHIESON & ASSOCIATES INSURANCE LTD.
Address	50 MORRISON STREET
City-State-Zip:	STRATFORD ON N5A 5L2

Title	MGRM
Name	PROPORRTIES INC.
Address	50 COBURG STREET
City-State-Zip:	STRATFORD ON N5A 3E5

Title	MGRM
Name	CMMCC CONSULTING SERVICES INC.
Address	75 WINDEMERE CRES
City-State-Zip:	STRATFORD ON N5A 6A8

Title	MGRM
Name	PHILLIPS DESIGN INC.
Address	156 ST. GEORGE STREET
City-State-Zip:	MITCHELL ONTARIO CANADA OC N0K 1-N0

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 PEARCE**MEMBER**

07/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date