

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000035800

**Entity Name:** OSCEOLA OUTDOORS ADVENTURES LLC

**Current Principal Place of Business:**

6262 NW 44TH AVE  
OCALA, FL 34482

**Current Mailing Address:**

PO BOX 327  
OCALA, FL 34478 US

**FEI Number:** 45-4864309

**Certificate of Status Desired:** No

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

BRUCE, BALENTINE P  
6262 NW 44TH AVE  
OCALA, FL 34482 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 BALENTINE, BRUCE P  
Address 6262 NW 44TH AVE  
City-State-Zip: Ocala FL 34482

*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:** BRUCE BALENTINE

MGRM

05/01/2020

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

\_\_\_\_\_ Date