

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000049853

**Entity Name:** VILLA SANTA CRUZ, LLC

**Current Principal Place of Business:**

4915 SW 2ND PLACE  
CAPE CORAL, FL 33914

**Current Mailing Address:**

3665 BONITA BEACH ROAD  
SUITE 1-3  
BONITA SPRINGS, FL 34134 US

**FEI Number:** 32-0375343

**Certificate of Status Desired:** No

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

ALLURE ACCOUNTING, INC.  
3665 BONITA BEACH ROAD  
SUITE 1-3  
BONITA SPRINGS, FL 34134 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	Title	MGRM
Name	STADLER, PIUS	Name	STADLER, ROSMARIE
Address	ST. GALLERSTRASSE 54	Address	ST. GALLERSTRASSE 54
City-State-Zip:	JONA 8645	City-State-Zip:	JONA 8645

*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:** PIUS STADLER

**MANAGER**

**02/04/2021**

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

\_\_\_\_\_  
Date