

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000140723

**Entity Name:** 5220 S. W. 10TH AVENUE LLC

**Current Principal Place of Business:**

15291 SAM SNEAD LN  
N FT MYERS, FL 33917

**Current Mailing Address:**

911 W. NORTH BLVD  
LEESBURG, FL 34748-5054 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SHUMACKER, JACOB CIII  
911 W. NORTH BLVD.  
LEESBURG, FL 34748-5054 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 BURDETTE, WILLIAM P  
Address 15291 SAM SNEAD LN  
City-State-Zip: N FT MYERS FL 33917

*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:** WILLIAM P BURDETTE

MEMBER MANAGER

01/31/2019

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

\_\_\_\_\_ Date