

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000149564

Entity Name: AMBERLEE ACRES, LLC**Current Principal Place of Business:**33289 BLANTON RD.
DADE CITY, FL 33523**Current Mailing Address:**33289 BLANTON RD.
DADE CITY, FL 33523 US**FEI Number:** 83-1542577**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRUECK-ADEEB, DEANNA LYNN
33289 BLANTON RD.
DADE CITY, FL 33523 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:** DEANNA LYNN BRUECK-ADEEB

04/28/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PROPERTY MANAGER
Name BRUECK-ADEEB, DEANNA L OWNER
Address 33289 BLANTON RD.
City-State-Zip: DADE CITY FL 33523

Title MANAGER, LEASOR
Name BRUECK, DEANNA L
Address 33289 BLANTON RD.
City-State-Zip: DADE CITY FL 33523

Title VP
Name ADEEB, JEFFREY MARK
Address 33289 BLANTON RD.
City-State-Zip: DADE CITY FL 33523

Title AUTHORIZED MEMBER
Name BRUECK, WILLIAM V
Address 1768 GREENRIDGE CIR E
City-State-Zip: JACKSONVILLE FL 32259

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: DEANNA LYNN BRUECK-ADEEB

PROPERTY MANAGER

04/28/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date