## 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.

MGR

SIGNATURE: JOHN A SCHINKE

Electronic Signature of Signing Authorized Person(s) Detail

# DELTONA, FL 32725

409 LAKEFRONT COURT DELTONA, FL 32725 US

#### FEI Number: 46-1549398

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

SCHINKE, JOHN A 409 LAKEFRONT COURT DELTONA, FL 32725 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	: JOHN A SCHINKE			04/28/2022
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	AUTHORIZED MEMBER	
Name	SCHINKE, JOHN A	Name	SCHINKE, ZANE C	
Address	409 LAKEFRONT COURT	Address	1482 DRYSDALE DR	
City-State-Zip:	DELTONA FL 32725	City-State-Zip:	DELTONA FL 32725	

### DOCUMENT# L12000154522

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: JOHN A. SCHINKE, LLC

#### Current Principal Place of Business:

409 LAKEFRONT COURT

Apr 28, 2022 Secretary of State 4625697033CC

FILED

Certificate of Status Desired: Yes

04/28/2022 Date