

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000007037

**Entity Name:** CONSTANTINO, NELSON & WERLINE, LLC

**Current Principal Place of Business:**

1222 SE 47TH STREET, SUITE 305  
CAPE CORAL, FL 33904

**Current Mailing Address:**

1222 SE 47TH STREET, SUITE 305  
CAPE CORAL, FL 33904 US

**FEI Number:** 65-0676062

**Certificate of Status Desired:** No

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

GREEN, BRUCE D  
1380 ROYAL PALM SQUARE BLVD  
FT MYERS, FL 33919 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	MGR	Title	MGR
Name	CONSTANTINO, ANTHONY M	Name	NELSON, DEE K
Address	1222 SE 47TH STREET, SUITE 305	Address	1222 SE 47TH STREET, SUITE 305
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33904
Title	MGR		
Name	WERLINE, YVONNE		
Address	1222 SE 47TH STREET, SUITE 305		
City-State-Zip:	CAPE CORAL FL 33904		

*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:** DEE NELSON

MEMBER

04/19/2023

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

\_\_\_\_\_  
Date