

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000034906

**Entity Name:** VILLA ISLE DR 4-207 LLC

**Current Principal Place of Business:**

1420 CELEBRATION BLVD SUITE 313  
CELEBRATION, FL 34747

**Current Mailing Address:**

1420 CELEBRATION BLVD STE 313  
CELEBRATION, FL 34747 US

**FEI Number:** 46-2217911

**Certificate of Status Desired:** No

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

KEILA, RINCON  
1420 CELEBRATION BLVD SUITE 313  
CELEBRATION, FL 34747 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:** KEILA RINCON

04/04/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name AVILA, MANUEL A  
Address 1420 CELEBRATION BLVD SUITE 313  
City-State-Zip: CELEBRATION FL 34747

Title MGRM  
Name RINCON, KEILA  
Address 1420 CELEBRATION BLVD SUITE 313  
City-State-Zip: CELEBRATION FL 34747

*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:** KEILA RINCON

MGR

04/04/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date