## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000138020

Entity Name: CHURCHILL STATESIDE NC TAX CREDIT FUND IV MANAGING

MEMBER, LLC

Mar 25, 2024 **Secretary of State** 5674716629CC

**FILED** 

## **Current Principal Place of Business:**

915 CHESTNUT ST CLEARWATER, FL 33756

# **Current Mailing Address:**

915 CHESTNUT ST

CLEARWATER, FL 33756 US

FEI Number: 32-0448370 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 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:

MANAGER

Name GLOECKL, KEITH Address 915 CHESTNUT ST

City-State-Zip: CLEARWATER FL 33756

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.

03/25/2024 **MANAGER** SIGNATURE: KEITH GLOECKL