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: NINA ERKERT	AUTHORIZED MEMBER	04/27/2021		

SIGNATURE: NINA ERKERT

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000149735

Entity Name: LEMON BAY VACATIONS LLC

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

2580 NORTH BEACH ROAD ENGLEWOOD, FL 34223

# **Current Mailing Address:**

2580 NORTH BEACH ROAD ENGLEWOOD, FL 34223 US

## FEI Number: 47-1992572

### Name and Address of Current Registered Agent:

MURTHA, CHRIS 2800 PLACIDA RD 106 ENGLEWOOD, FL 34224 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	CHRIS MURTHA			04/27/2021	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	AUTHORIZED MEMBER	Title	MANAGER		
Name	ERKERT, NINA	Name	JELICAERKERT, KRISTIAN		
Address	2580 NORTH BEACH ROAD	Address	2580 NORTH BEACH ROAD		
City-State-Zip:	ENGLEWOOD FL 34223	City-State-Zip:	ENGLEWOOD FL 34223		

AUTHORIZED MEMBER

Date

# FILED Apr 27, 2021 **Secretary of State** 5935511146CC

Certificate of Status Desired: Yes

Electronic Signature of Signing Authorized Person(s) Detail