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

Electronic Signature of Signing Authorized Person(s) Detail

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					
	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			

## FEI Number: 47-1992572

### Name and Address of Current Registered Agent:

MURTHA, CHRIS 2800 PLACIDA RD 109 ENGLEWOOD, FL 34224 US

Certificate of Status Desired: No

2023 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

03/29/2023

AUTHORIZED MEMBER

Date

FILED Mar 29, 2023 Secretary of State 3410245123CC