

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000185597

**Entity Name:** WEISS LANE PROPERTIES, LLC

**Current Principal Place of Business:**

13514 EMERALDVIEW DRIVE  
ORLANDO, FL 32828

**Current Mailing Address:**

13514 EMERALDVIEW DRIVE  
ORLANDO, FL 32828

**FEI Number: 47-2459240**

**Certificate of Status Desired: No**

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

COVERT, TERRY W  
631 PALM SPRINGS DRIVE  
SUITE 115  
ALTAMONTE SPRINGS, FL 32701 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 MGRM  
Name WEISS, WALTER  
Address 13514 EMERALDVIEW DR.  
City-State-Zip: ORLANDO FL 32828

Title MGRM  
Name SULLIVAN, BARBARA ANN  
Address 138 WEISS LN  
City-State-Zip: BURNSVILLE NC 28714

Title AUTHORIZED MEMBER  
Name WEISS, WALTER CO-TRUSTEE  
Address 13514 EMERALDVIEW DRIVE  
City-State-Zip: ORLANDO FL 32828

Title AUTHORIZED MEMBER  
Name WEISS, MELISSA CO-TRUSTEE  
Address 13514 EMERALDVIEW DRIVE  
City-State-Zip: ORLANDO FL 32828

Title AUTHORIZED MEMBER  
Name SULLIVAN, BARBARA  
Address 138 WEISS LN  
City-State-Zip: BURNSVILLE NC 28714

*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: WALTER WEISS**

**MANAGER**

**02/26/2022**

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

\_\_\_\_\_  
Date