## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000103318

Entity Name: ROBINSON ESTATES, LLC

**Current Principal Place of Business:** 

20447 ROBINSON ROAD DUNNELLON, FL 34431

**Current Mailing Address:** 

P.O. BOX 489

DUNNELLON, FL 34430

FEI Number: 59-1397355 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, CHARLES J 9671 S.W. 190TH AVENUE ROAD DUNNELLON, FL 34432 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:

City-State-Zip:

Title

Electronic Signature of Registered Agent

Date

**FILED** Apr 01, 2022

**Secretary of State** 

0780062223CC

Authorized Person(s) Detail:

V

Title MGR. P Title MGR, S

SMITH, CHARLES J Name MCBRIDE, ROBIN S Name 943 S.E. 5TH STREET P.O. BOX 489 Address Address City-State-Zip: OCALA FL 34471 **DUNNELLON FL 34430** 

Name STOUT, JAN S STRONG, TERESA L Name

Address 9671 S.W. 190TH AVENUE ROAD Address 9677 S.W. 190TH AVENUE ROAD

Title

Т

**DUNNELLON FL 34432** City-State-Zip: City-State-Zip: **DUNNELLON FL 34432** 

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: CHARLES J SMITH

**MANAGER** 

04/01/2022

Date