## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000185966

**Entity Name: FLOWERS DR LLC** 

**Current Principal Place of Business:** 

2113 FLOWERS DR FORT MYERS. FL 33907

**Current Mailing Address:** 

2113 FLOWERS DR

FORT MYERS. FL 33907 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KENNER, ROBERT 1458 XAVIER AVE FORT MYERS, FL 33919 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.

**AMBR** 

**MEMBER** 

SIGNATURE:

Electronic Signature of Registered Agent

Date

**FILED** May 22, 2020

**Secretary of State** 

9376046498CC

Authorized Person(s) Detail:

Title **AMBR** Title

KENNER, ROBERT Name SUERO, DANIEL Name 1458 XAVIER AVE Address 3719 SE18TH PL Address

City-State-Zip: FORT MYERS FL 33919 City-State-Zip: CAPE CORAL FL 33904

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: ROBERT KENNER