

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000203140

**Entity Name:** LAKE HELEN I-4 HOTEL, LLC

**Current Principal Place of Business:**

650 SOUTH LAKEVIEW  
LAKE HELEN, FL 32744

**Current Mailing Address:**

7335 RIVER ROAD  
CONESTOGA, PA 17516 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

MCFALL, DAN E  
650 SOUTH LAKEVIEW  
LAKE HELEN, FL 32744 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           | MGR                 | Title           | OWNER                     |
| Name            | MCFALL, DAN E       | Name            | STEUDLER, JR, FREDERICK W |
| Address         | 650 SOUTH LAKEVIEW  | Address         | 7335 RIVER ROAD           |
| City-State-Zip: | LAKE HELEN FL 32744 | City-State-Zip: | CONESTOGA PA 17516        |

*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:** STEUDLER, JR , FREDERICK W

**OWNER**

**06/23/2020**

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

\_\_\_\_\_  
Date