

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000227834

**Entity Name:** LRHOMEVEST LLC

**Current Principal Place of Business:**

1133 CORD CT.  
APOPKA, FL 32712

**Current Mailing Address:**

1133 CORD CT.  
APOPKA, FL 32712 US

**FEI Number: 81-4772643**

**Certificate of Status Desired: No**

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

REGISTERED AGENTS INC  
7901 4TH STREET NORTH  
SUITE 300  
ST.PETERSBURG, FL 33702 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            AMBR  
Name            LISSETTE REINA LIVING TRUST  
Address        1133 CORD CT.  
City-State-Zip: APOPKA FL 32712

*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: LISSETTE REINA**

**CFO**

**03/21/2022**

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

\_\_\_\_\_  
Date