

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000109314

**Entity Name:** SEWARD DRIVE LLC**Current Principal Place of Business:**220 OSOWAW BLVD  
SPRING HILL, FL 34607**Current Mailing Address:**220 OSOWAW BLVD  
SPRING HILL, FL 34607 US**FEI Number:** 82-1576729**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HANSEN, CHERYL  
220 OSOWAW BLVD  
SPRING HILL, FL 34607 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                                      |
| Name            | HANSEN, CHERYL                           |
| Address         | 220 OSOWAW BLVD                          |
| City-State-Zip: | SPRING HILL FL 34607                     |
| Title           | AP                                       |
| Name            | CHERYL HANSEN FBO THE HANSEN<br>401K PSP |
| Address         | 220 OSOWAW BLVD                          |
| City-State-Zip: | SPRING HILL FL 34607                     |

|                 |                                           |
|-----------------|-------------------------------------------|
| Title           | MGR                                       |
| Name            | RUSSELL, HANSEN                           |
| Address         | 220 OSOWAW BLVD                           |
| City-State-Zip: | SPRING HILL FL 34607                      |
| Title           | AP                                        |
| Name            | RUSSELL HANSEN FBO THE HANSEN<br>401K PSP |
| Address         | 220 OSOWAW BLVD                           |
| City-State-Zip: | SPRING HILL FL 34607                      |

*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:** CHERYL HANSEN

MGR

02/22/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date