

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000194823

Entity Name: JCH VENTURES 4, LLC**Current Principal Place of Business:**9717 EAGLE CREEK CENTER BLVD
STE 200
ORLANDO, FL 32832**Current Mailing Address:**283 CRANES ROOST BLVD
STE 250
ALTAMONTE SPRINGS, FL 32701 US**FEI Number:** 38-4048184**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARUSO, AMANDA
283 CRANES ROOST BLVD
STE 250
ALTAMONTE SPRINGS, FL 32701 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:** AMANDA CARUSO

04/03/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MRGP
Name HUTSON, ROBERT T II
Address 283 CRANES ROOST BLVD
STE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VPS
Name PITT, LAWRENCE B
Address 283 CRANES ROOST BLVD
STE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP
Name MEEKS, KIMBERLY
Address 283 CRANES ROOST BLVD
STE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title MGRV
Name CLABER, JONATHAN
Address 283 CRANES ROOST BLVD
STE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VPT
Name THOMAS, SHARON L
Address 283 CRANES ROOST BLVD
STE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP
Name CARUSO, AMANDA
Address 283 CRANES ROOST BLVD
STE 250
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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: LAWRENCE B PITT

VICE PRESIDENT

04/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date