

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000257778

Entity Name: 2395 SHADOWLAWN LLC

Current Principal Place of Business:

6838 MANGROVE AVE
NAPLES, FL 34109

Current Mailing Address:

6838 MANGROVE AVE
NAPLES, FL 34109 US

FEI Number: 82-4385461

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HUNT, DOUGLAS A
6838 MANGROVE AVE
NAPLES, FL 34109 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 HUNT, DOUGLAS A
Address 6838 MANGROVE AVE
City-State-Zip: NAPLES FL 34109

Title MGR
Name HUNT, JOANNE
Address 6838 MANGROVE AVE
City-State-Zip: NAPLES FL 34109

Title AUTHORIZED MEMBER
Name HUNT, DANIEL ROBERT
Address 44 CARMAN STREET
City-State-Zip: SCARSDALE NY 10583

Title AUTHORIZED MEMBER
Name KING, KRISTINE ELISE DR.
Address 9100 FENSHAW CT
City-State-Zip: MECHANICSVILLE VA 23116

Title AUTHORIZED MEMBER
Name HUNT, THOMAS MICHAEL
Address 187 CLASSON AVENUE
#1
City-State-Zip: BROOKLYN NY 11205

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: DOUGLAS A HUNT

MANAGER

02/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date