

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000015125

**Entity Name:** LIBERTY PINES NATURAL HORSEMANSHIP LLC

**Current Principal Place of Business:**

16651 NE 10TH ST.  
WILLISTON, FL 32696

**Current Mailing Address:**

16651 NE 10TH ST  
WILLISTON, FL 32696 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BEARDSLEY, SHAUN  
16651 NE 10TH ST.  
WILLISTON, FL 32696 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	AP
Name	BEARDSLEY, SHAUN	Name	BEARDSLEY, WILLIAM T
Address	16651 NE 10TH ST.	Address	16651 NE 10TH ST.
City-State-Zip:	WILLISTON FL 32696	City-State-Zip:	WILLISTON FL 32696

*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:** SHAUN BEARDSLEY

**MANAGER**

**02/14/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date