

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000093265

**Entity Name:** 57TH PLACE LLC

**Current Principal Place of Business:**

3699 LIGHTVIEW LN  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

PO BOX 350105  
JACKSONVILLE, FL 32235 US

**FEI Number:** 82-5228313

**Certificate of Status Desired:** No

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

FOLEY, JACQUELINE  
5237 SUMMERLIN COMMONS  
SUITE 400  
FORT MYERS, FL 33907 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:** JACQUELINE FOLEY

09/21/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name FOLEY, JACQUELINE  
Address 3699 LIGHTVIEW LN  
City-State-Zip: JACKSONVILLE FL 32225

*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:** JACQUELINE FOLEY

**OWNER**

09/21/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date