

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000110038

**Entity Name:** FRUITS OF LIFE RETREAT. LLC**Current Principal Place of Business:**6863 LAKESIDE ROAD  
WEST PALM BEACH, FL 33411**Current Mailing Address:**6863 LAKESIDE ROAD  
WEST PALM BEACH, FL 33411**FEI Number:** 82-5498132**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DESROULEAUX, GINETTE RN  
2308 RIDGEWOOD CIRCLE  
ROYAL PALM BEACH, FL 33411 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:** GINETTE DESROULEAUX, RN

03/15/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR
Name	DESROULEAUX, LANCE
Address	6863 LAKESIDE ROAD
City-State-Zip:	WEST PALM BEACH FL 33411

Title	MGR
Name	DESROULEAUX, FABIEN
Address	257 LOMOND DRIVE
City-State-Zip:	PORT CHARLOTTE FL 33953

Title	AR
Name	DESROULEAUX, LESLY
Address	2308 RIDGEWOOD CIRCLE
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	CHAIRMAN
Name	DESROULEAUX, GINETTE RN
Address	6863 LAKESIDE ROAD
City-State-Zip:	WEST PALM BEACH FL 33411

*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:** LANCE DESROULEAUX

MANAGER

03/15/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date