

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000131877

**Entity Name:** ST MARY'S FAMILY LLC

**Current Principal Place of Business:**

1032 TAMIAMI TRAIL  
SUITE # 11  
PORT CHARLOTTE, FL 33953

**Current Mailing Address:**

5675 N ATLANTIC AVE  
SUITE # 117  
COCO BEACH, FL 32931 US

**FEI Number:** 83-0850164

**Certificate of Status Desired:** No

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

PHILIP, ALKA  
5675 N ATLANTIC AVE  
SUITE # 117  
COCO BEACH, FL 32931 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 PHILIP, ALKA  
Address 5675 N ATLANTIC AVE, SUITE 117  
City-State-Zip: COCO BEACH FL 32931

Title MGR  
Name BALANANDAN, AJESH  
Address 3086 SW 15TH PLACE  
City-State-Zip: CAPE CORAL FL 33914

Title MGR  
Name NEENU, VISHNU PRATAP  
Address 202 NICHOLAS PKWY E  
City-State-Zip: CAPE CORAL FL 33990

*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:** NEENU VISHNU PRATAP

**OWNER**

**06/19/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date