

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000216654

**Entity Name:** FV ONE MORE FISH LLC

**Current Principal Place of Business:**

577 COCONUT AVE  
GOODLAND, FL 34140

**Current Mailing Address:**

PO BOX 535  
GOODLAND, FL 34140

**FEI Number:** 83-1922913

**Certificate of Status Desired:** No

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

VANDORN, WILLIAM M  
577 COCONUT AVE  
GOODLAND, FL 34140 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           | MGR               |
| Name            | VANDORN, WILLIAM M | Name            | VANDORN, LAUREL A |
| Address         | 577 COCONUT AVE    | Address         | 577 COCONUT AVE   |
| City-State-Zip: | GOODLAND FL 34140  | City-State-Zip: | GOODLAND FL 34140 |

*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:** WILLIAM VANDORN

**MANAGER**

**01/15/2020**

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

\_\_\_\_\_  
Date