

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000010640

**Entity Name:** 2540 SRQ TRAIL, LLC

**Current Principal Place of Business:**

2540 S. TAMIAMI TRAIL  
SARASOTA, FL 34239

**FILED**  
**Apr 26, 2022**  
**Secretary of State**  
**3860992269CC**

**Current Mailing Address:**

100 THIRD AVE WEST  
SUITE 110  
BRADENTON, FL 34205 US

**FEI Number:** 83-3137569

**Certificate of Status Desired:** No

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

BLALOCK WALTERS, P.A.  
2 N. TAMIAMI TRAIL  
SUITE 400  
SARASOTA, FL 34236 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 AMBR  
Name RNCA ASSET MANAGEMENT, LLC  
Address 200 W. 34TH AVE  
#977  
City-State-Zip: ANCHORAGE AK 99503

Title MANAGER  
Name GLENN, TARA A  
Address 2540 S. TAMIAMI TRAIL  
City-State-Zip: SARASOTA FL 34239

Title MANAGER  
Name RAMOS, FABIAN A  
Address 2540 S. TAMIAMI TRAIL  
City-State-Zip: SARASOTA FL 34239

*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:** TARA GLENN

MANAGER

04/26/2022

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

\_\_\_\_\_ Date