

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000016050

**Entity Name:** 830 SUNSHINE LANE, LLC

**Current Principal Place of Business:**

830 SUNSHINE LANE  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

830 SUNSHINE LANE  
ALTAMONTE SPRINGS, FL 32714 US

**FEI Number:** 83-3212630

**Certificate of Status Desired:** No

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

LIPPERT, TRENTON  
830 SUNSHINE LANE  
ALTAMONTE SPRINGS, FL 32714 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 P  
Name LIPPERT, RICHARD D JR.  
Address 206 WESSEX RD  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title V  
Name LIPPERT, KAREN E  
Address 206 WESSEX RD  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title AMBR  
Name TL VENTURES GROUP, LLC  
Address 830 SUNSHINE LANE  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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:** TRENTON LIPPERT

**REGISTERED AGENT**

**01/30/2020**

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

\_\_\_\_\_  
Date