

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000043341

**Entity Name:** 220 FREEMAN STREET, LLC.

**Current Principal Place of Business:**

450 HARBOUR ISLE WAY  
LONGWOOD, FL 32750

**Current Mailing Address:**

450 HARBOUR ISLE WAY  
LONGWOOD, FL 32750

**FEI Number:** 83-3542547

**Certificate of Status Desired:** No

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

BRYAN, SCOTT A  
450 HARBOUR ISLE WAY  
LONGWOOD, FL 32750 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            MMBR  
Name            BRYAN, SCOTT A  
Address        450 HARBOUR ISLE WAY  
City-State-Zip: LONGWOOD FL 32750

Title            MBR  
Name            BRYAN, STEPHENIE J  
Address        450 HARBOUR ISLE WAY  
City-State-Zip: LONGWOOD FL 32750

*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:** SCOTT A BRYAN

MMBR

01/07/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date