

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000137897

**Entity Name:** ANGLERS TIDE LLC.

**Current Principal Place of Business:**

15275 COLLIER BOULEVARD  
SUITE 201-440  
NAPLES, FL 34119

**Current Mailing Address:**

15275 COLLIER BOULEVARD  
SUITE 201-440  
NAPLES, FL 34119 US

**FEI Number:** 88-2243994

**Certificate of Status Desired:** No

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

TOURINO, CRISTINA  
15275 COLLIER BOULEVARD  
SUITE 201-440  
NAPLES, FL 34119 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 TOURINO, CRISTINA  
Address 15275 COLLIER BOULEVARD  
SUITE 201-440  
City-State-Zip: NAPLES FL 34119

Title MANAGER  
Name TOURINO, MICHEL  
Address 15275 COLLIER BOULEVARD  
SUITE 201-440  
City-State-Zip: NAPLES FL 34119

*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:** CRISTINA TOURINO

MGR

04/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date