

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000206061

**Entity Name:** LOMBARDY AVE, LLC

**Current Principal Place of Business:**

258 LOMBARDY AVENUE  
LAUDERDALE BY THE SEA, FL 33308

**Current Mailing Address:**

5126 SPRINGLEAF DRIVE  
HAMILTON, OH 45011

**FEI Number: 84-2766219**

**Certificate of Status Desired: No**

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

AZOGUE, CAROLE  
251 LOMBARDY AVENUE  
LAUDERDALE BY THE SEA, FL 33308 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 WILKENS, LESLIE  
Address 5126 SPRINGLEAF DRIVE  
City-State-Zip: HAMILTON OH 45011

Title AMBR  
Name WILKENS, BRENT  
Address 5126 SPRINGLEAF DRIVE  
City-State-Zip: HAMILTON OH 45011

Title AMBR  
Name WILKENS, GREGORY  
Address 5622 WALTHER DRIVE  
City-State-Zip: FAIRFIELD OH 45014

Title AMBR  
Name WILKENS, PAMELA  
Address 5622 WALTHER DRIVE  
City-State-Zip: FAIRFIELD OH 45014

*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: LESLIE WILKENS**

**MANAGING MEMBER**

**04/10/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date