

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L19000306484

**Entity Name:** MARONDA HOMES, LLC OF FLORIDA**Current Principal Place of Business:**11 TIMBERGLEN DR  
IMPERIAL, PA 15126**Current Mailing Address:**4005 MARONDA WAY  
SANFORD, FL 32771 US**FEI Number:** 25-1336949**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOWARD, SCOTT C  
4005 MARONDA WAY  
SANFORD, FL 32771 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:** SCOTT C. HOWARD

06/20/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name MARONDA, INC.  
Address 11 TIMBERGLEN DRIVE  
City-State-Zip: IMPERIAL PA 15126

Title VP  
Name ERIC, SERGI G.  
Address 3999 WEST FIRST ST.  
City-State-Zip: SANFORD FL 32771

Title VP  
Name PRIOR, THOMAS  
Address 3999 WEST FIRST STREET  
City-State-Zip: SANFORD FL 32771

Title PRESIDENT  
Name INTILLE, ROBERT G.  
Address 1686 WEST HIBISCUS BLVD.  
City-State-Zip: MELBOURNE FL 32901

Title VP  
Name ADAMS, ALEX J  
Address 5220 SHAD ROAD  
SUITE 202  
City-State-Zip: JACKSONVILLE FL 32257

Title VP  
Name ANDERSON, LESLIE  
Address 1686 W. HIBISCUS BLVD.  
City-State-Zip: MELBOURNE FL 32901

Title VP  
Name HOWARD, SCOTT C  
Address 4005 MARONDA WAY  
City-State-Zip: SANFORD FL 32771

Title VP  
Name DORSEY, TUCKER  
Address 4005 MARONDA WAY  
City-State-Zip: SANFORD FL 32771

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*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:** CHRIS RUDDLE

VICE PRESIDENT

06/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title VP  
Name MCCONAGHEY, PETER  
Address 9146 CAMDEN FIELD PARKWAY  
City-State-Zip: RIVERVIEW FL 33578

Title AUTHORIZED REPRESENTATIVE  
Name KEANE, PETER  
Address 4005 MARONDA WAY  
City-State-Zip: SANFORD FL 32777

Title VP  
Name BROEDEL, WAYNE  
Address 3999 WEST FIRST STREET  
City-State-Zip: SANFORD FL 32771

Title VP  
Name MOORE, MARTIN  
Address 2286 W FIRST STREET  
City-State-Zip: FORT MYERS FL 33901

Title VP  
Name RUDDLE , CHRIS  
Address 4005 MARONDA WAY  
City-State-Zip: SANFORD FL 32777

Title VP  
Name FABER, SCOTT  
Address 1686 W. HIBISCUS BLVD  
City-State-Zip: MELBOURNE FL 32901