

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000022777

**Entity Name:** PLP20, LLC

**Current Principal Place of Business:**

11843 BLUE HERON CT.  
DUNNELLON, FL 34432

**Current Mailing Address:**

PO BOX 101  
DUNNELLON, FL 34430

**FEI Number:** 84-4303730

**Certificate of Status Desired:** No

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

PHELPS, MARSHA G  
11843 BLUE HERON CT.  
DUNNELLON, FL 34432 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 MBR  
Name PHELPS, PATRICIA M  
Address PO BOX 101  
City-State-Zip: DUNNELLON FL 34430

Title MGR  
Name JAMES, PHELPS S  
Address 11843 BLUE HERON CT.  
City-State-Zip: DUNNELLON FL 34432

Title AR  
Name PHELPS, MARSHA G  
Address 11843 BLUE HERON CT.  
City-State-Zip: DUNNELLON FL 34432

*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:** MARSHA PHELPS

AR

02/03/2021

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

\_\_\_\_\_  
Date