

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000038247

**Entity Name:** PALMS SPLENDOR PORT CHARLOTTE, LLC

**Current Principal Place of Business:**

18009 BRAZIL AVE  
PORT CHARLOTTE, FL 33948

**Current Mailing Address:**

38784 COVINGTON DR.  
STERLING HEIGHTS, MI 48312 US

**FEI Number: 84-4872410**

**Certificate of Status Desired: Yes**

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

REGISTERED AGENTS INC.  
7901 4TH ST. N  
SUITE 300  
ST PETERSBURG, FL 33702 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 BREHM GATES, THERESA A  
Address 38784 COVINGTON DR.  
City-State-Zip: STERLING HEIGHTS MI 48312

Title AMBR  
Name GATES, GARY M  
Address 24440 PHLOX AVE  
City-State-Zip: EASTPOINTE MI 48021

Title AMBR  
Name BREHM, STEVEN W  
Address 14630 15 MILE RD  
City-State-Zip: STERLING HTS MI 48312

*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: THERESA A BREHM GATES**

**MANAGER**

**02/21/2024**

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

\_\_\_\_\_  
Date