

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000074728

**Entity Name:** 60 NORTHCLIFFE LLC

**Current Principal Place of Business:**

60 NORTHCLIFFE DR  
GULF BREEZE, FL 32561

**Current Mailing Address:**

PO BOX 1103  
GULF BREEZE, FL 32562 US

**FEI Number:** 84-5162936

**Certificate of Status Desired:** No

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

JACOBS, RICHARD  
60 NORTHCLIFFE DR  
GULF BREEZE, FL 32561 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 JACOBS, RICHARD  
Address 60 NORTHCLIFFE DR  
City-State-Zip: GULF BREEZE FL 32561

*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:** RICHARD L JACOBS

CEO

01/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date