## **2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000088068

Entity Name: MNA VACATION RENTALS, LLC

ility Name. WINA VACATION RENTALS, LL

**Current Principal Place of Business:** 

4019 LUFF STREET

UNIT 1

PANAMA CITY BEACH, FL 32408

## **Current Mailing Address:**

4019 LUFF STREET UNIT 1

PANAMA CITY BEACH, FL 32408 US

FEI Number: 85-0533846 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KRYVEN, MARINA 111 CASCADE FALLS LANE PANAMA CITY BEACH, FL 32407 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

FILED Jan 11, 2021

**Secretary of State** 

7899676663CC

## Authorized Person(s) Detail:

Title MGR

Title MGR

Address

Name KRYVEN, MARINA

Name LEBEDEV, ALEN

Address 111 CASCADE FALLS LANE

111 CASCADE FALLS LANE

City-State-Zip: PANAMA CITY BEACH FL 32407

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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.