## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000365929

Entity Name: 6190 TOWNCENTER, LLC

**Current Principal Place of Business:** 

13915 OLD COAST ROAD UNIT NO. 803 NAPLES, FL 34110

**Current Mailing Address:** 

13915 OLD COAST ROAD **UNIT NO. 803** NAPLES, FL 34110 US

FEI Number: 85-3462362 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WARRANTY TITLE SOLUTIONS, LLC 12331 TOWNE LAKE DRIVE SUITE 7 FORT MYERS, FL 33913 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:

Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

803

Title AP/AMBR Title ΑP

Name HEYMANN, ANTHONY Name HEYMANN, ERNEST L

13915 OLD COAST ROAD, UNIT NO. 13915 OLD COAST ROAD, UNIT NO. Address Address

City-State-Zip: NAPLES FL 34110 City-State-Zip: NAPLES FL 34110

Title **AMBR** 

Name ERNEST L. HEYMANN, TRUSTEE OF

THE ERNEST L. HEYMANN

REVOCABLE TRUST

13915 OLD COAST ROAD Address

**UNIT NO. 803** 

NAPLES FL 34110 City-State-Zip:

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: ANTHONY HEYMANN

Electronic Signature of Signing Authorized Person(s) Detail

MANAGING MEMBER

04/06/2022

**FILED** Apr 06, 2022

**Secretary of State** 

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