

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000056660

**Entity Name:** VILLAGE MANOR LLC

**Current Principal Place of Business:**

6896 ANTHURIUM LN.  
NAPLES, FL 34113

**Current Mailing Address:**

6896 ANTHURIUM LN.  
NAPLES, FL 34113 US

**FEI Number: 86-2185204**

**Certificate of Status Desired: No**

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

TROESKEN, RICH  
6896 ANTHURIUM LN.  
NAPLES, FL 34113 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	Title	MEMBER
Name	TROESKEN, RICH	Name	TROESKEN, DIETER
Address	6896 ANTHURIUM LN.	Address	W4225 THE LINDENS
City-State-Zip:	NAPLES FL 34113	City-State-Zip:	LAKE GENEVA WI 53147
Title	MEMBER	Title	MEMBER
Name	TROESKEN, BECKY	Name	TROESKEN, THOMAS
Address	N1397 MEADOW RIDGE LANE	Address	136 ZELLWOOD DRIVE
City-State-Zip:	LAKE GENEVA WI 53147	City-State-Zip:	BRUNSWICK GA 31523
Title	MEMBER		
Name	NICHOLS, KATHERINE		
Address	123 COPPER RIDGE DRIVE		
City-State-Zip:	WOODSTOCK GA 30188		

*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: RICH TROESKEN**

**MANAGER**

**03/12/2022**

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

\_\_\_\_\_  
Date