

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000086815

**Entity Name:** 7103 LILY WAY, LLC

**Current Principal Place of Business:**

385 KNOLLWOOD ROAD EXT.  
ELMSFORD, NY 10523

**Current Mailing Address:**

385 KNOLLWOOD ROAD EXT.  
ELMSFORD, NY 10523 US

**FEI Number:** 86-2549799

**Certificate of Status Desired:** No

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

THRELKELD LAW, P.A.  
3003 TAMIAMI TR. N., STE. 400  
NAPLES, FL 34103 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 AMANTE, DIANE  
Address 385 KNOLLWOOD ROAD EXT.  
City-State-Zip: ELMSFORD NY 10523

Title MGR  
Name AMANTE, RICHARD J  
Address 385 KNOLLWOOD ROAD EXT.  
City-State-Zip: ELMSFORD NY 10523

Title MGR  
Name PASI, DAVID E. JR.  
Address 26 HUNTERS TRAIL  
City-State-Zip: WARREN NJ 07059

Title MBR  
Name D' ANTON, MICHAEL A. III  
Address 7658 SICILIA COURT  
City-State-Zip: NAPLES FL 34114

Title MBR  
Name D'ANTON, RUSSELL P.  
Address 2188 TERRACE PLACE  
City-State-Zip: SEA GIRT NJ 08750

Title MBR  
Name SHIELDS, DONALD  
Address 189 FAIRFIELD LANE  
City-State-Zip: HILLSBOROUGH NJ 08844

*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 J AMANTE

**MGR**

**01/25/2024**

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

\_\_\_\_\_  
Date