

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000400093

**Entity Name:** MID FLORIDA AMATEUR GOLF ASSOCIATION, LLC**Current Principal Place of Business:**12910 RIVER MEADOWS CT  
ORLANDO, FL 32828**Current Mailing Address:**12910 RIVER MEADOWS CT  
ORLANDO, FL 32828 UN**FEI Number:** 87-2549482**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CENDANA, RAMON S  
12910 RIVER MEADOWS CT  
ORLANDO, FL 32828 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	AMBR	Title	AMBR
Name	AGATEP, FELMOR C	Name	ARCEO, EDGARDO M
Address	1808 BENOIT TERRACE	Address	2513 TRAPSIDE CT
City-State-Zip:	DAVENPORT FL 33837	City-State-Zip:	KISSIMMEE FL 34746
Title	AMBR	Title	AMBR
Name	CENDANA, RAMON S JR	Name	RODRIGUEZ, CARLOS
Address	12910 RIVER MEADOWS CT	Address	2884 S SHINE AVE
City-State-Zip:	ORLANDO FL 32828	City-State-Zip:	ORLANDO FL 32806
Title	AMBR		
Name	TAN, DARWIN		
Address	3407 WILLOW BRANCH LN		
City-State-Zip:	KISSIMMEE FL 34741		

*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:** RAMON S CENDANA

AMBR

01/05/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date