

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000473361

**Entity Name:** COCONUT HIDEAWAY LLC

**Current Principal Place of Business:**

14740 CONWAY ROAD  
PORT CHARLOTTE, FL 33981

**Current Mailing Address:**

14740 CONWAY ROAD  
PORT CHARLOTTE, FL 33981

**FEI Number: 88-1865428**

**Certificate of Status Desired: No**

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

GAINES, LAURIE A  
14740 CONWAY ROAD  
PORT CHARLOTTE, FL 33981 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 GAINES, LAURIE A  
Address 14740 CONWAY ROAD  
City-State-Zip: PORT CHARLOTTE FL 33981

Title MGR  
Name GAINES, AMBROSE III  
Address 14740 CONWAY ROAD  
City-State-Zip: PORT CHARLOTTE FL 33981

Title AMBR  
Name AMBROSE AND LAURIE GAINES  
REVOCABLE TRUST  
Address 14740 CONWAY ROAD  
City-State-Zip: PORT CHARLOTTE FL 33981

*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: LAURIE GAINES**

**MANAGER**

**04/17/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date