

2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L22000192433

Entity Name: PREMIER PROPERTIES OF SOUTHWEST FLORIDA, LLC**Current Principal Place of Business:**4001 TAMIAMI TRAIL NORTH SUITE 350
NAPLES, FL 34103**Current Mailing Address:**4001 TAMIAMI TRAIL NORTH SUITE 350
NAPLES, FL 34103 US**FEI Number:** 59-2258867**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HUSKEY, BUDGE S
4001 TAMIAMI TRAIL NORTH SUITE 350
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 AMBR
Name HUSKEY, BUDGE STRATTON
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name SHEARER BRADWAY, LINDA
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name KANT, PATRICIA
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name MCDONALD, ERIN
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title AMBR
Name NEWELL, KRISTINE
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name GAPE, DAVID ALAN
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name GREENE WATERBURY, SANDRA
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name MAX, JUANITA
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Continues on page 2

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: BUDGE HUSKEY**REGISTERED AGENT****07/12/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MGR
Name OGILVIE, KATHLEEN
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name GALLAGHER-HARE, MARYANNE
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name POLLACK PRIETO, CAROLYN ANN
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name D'ALESSANDRO, GIOVANNA
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name WILLIAMS, DANIEL R
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name CERRETA, CRAIG
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MGR
Name FISHER, RACHEL LEA
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103

Title MANAGER
Name COOK, TERRENCE
Address 4001 TAMIAMI TRAIL NORTH SUITE 350
City-State-Zip: NAPLES FL 34103