

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000428716

**Entity Name:** 3590 SABLE PALM LN LLC

**Current Principal Place of Business:**

609 LAKESHORE DR  
EUSTIS, FL 32726

**Current Mailing Address:**

609 LAKESHORE DR.  
EUSTIS, FL 32726 US

**FEI Number:** 88-4172014

**Certificate of Status Desired:** No

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

WINTER, DOUGLAS A  
609 LAKESHORE DR.  
EUSTIS, FL 32726 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	MGR.
Name	WINTER, DOUGLAS A	Name	WINTER, THERESA L
Address	609 LAKESHORE DR.	Address	609 LAKESHORE DR.
City-State-Zip:	EUSTIS FL 32726	City-State-Zip:	EUSTIS FL 32726

*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:** DOUGLAS A WINTER

**MGR**

**02/16/2025**

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

\_\_\_\_\_  
Date