

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000459642

Entity Name: 5784 DECLARATION CT LLC

Current Principal Place of Business:

5784 DECLARATION CT
AVE MARIA, FL 34142

Current Mailing Address:

4971 SYCAMORE DRIVE
NAPLES, FL 34119

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIMARE, MARISSA
4971 SYCAMORE DRIVE
NAPLES, FL 34119 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 FIGLIOLA, PATRICIA
Address 4971 SYCAMORE DRI
City-State-Zip: NAPLES FL 34119

Title MGR
Name DIMARE, MARISSA
Address 4971 SYCAMORE DR
City-State-Zip: NAPLES FL 34119

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: MARISSA DIMARE

MANAGER

07/20/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date