

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000461422

Entity Name: BAYWAY ISLES SOCIAL LLC**Current Principal Place of Business:**4950 59TH AVE. .S
ST PETERSBURG, FL 33715**Current Mailing Address:**4950 59TH AVE. S.
ST PETERSBURG, FL 33715 UN**FEI Number:** 92-0887448**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JASUWAN, TORRIE
4950 49TH AVE. S.
SAINT PETERSBURG, FL 33715 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	TRS
Name	JASUWAN, TORRIE
Address	4950 59TH AVE. S.
City-State-Zip:	ST. PETERSBURG FL 33715

Title	PRES
Name	SANDERFORD, RHONDA
Address	4908 62ND AVENUE S.
City-State-Zip:	SAINT PETERSBURG FL 33715

Title	MBR
Name	ORKIN, CORAL
Address	5300 62ND AVE. S.
City-State-Zip:	ST. PETERSBURG FL 33715

Title	MBR
Name	MUHLHAUSEN, BO
Address	5950 51ST ST. S.
City-State-Zip:	ST. PETERSBURG FL 33715

Title	MBR
Name	LEE, LISA
Address	4909 62ND AVE. S.
City-State-Zip:	ST. PETERSBURG FL 33715

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: TORRIE T JASUWAN**TREASURER****04/10/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date