

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000484395

**Entity Name:** 219 SHEFFIELD CENTER, LLC

**Current Principal Place of Business:**

7001 LAKE ELLENOR DRIVE  
ORLANDO, FL 32809

**Current Mailing Address:**

7001 LAKE ELLENOR DRIVE  
ORLANDO, FL 32809 US

**FEI Number:** 37-2067171

**Certificate of Status Desired:** Yes

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

BRADLEY, JAMES  
7001 LAKE ELLENOR DRIVE  
ORLANDO, FL 32809 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            ACORN STAIRLIFT, INC.  
Address        7001 LAKE ELLENOR DRIVE  
City-State-Zip: ORLANDO FL 32809

*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:** JIM BRADLEY

**PRESIDENT**

**01/04/2024**

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

\_\_\_\_\_  
Date