

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000499936

Entity Name: 216 E CENTER, LLC

Current Principal Place of Business:

154 BLACK WALL CT.
BOCA GRANDE, FL 33921

Current Mailing Address:

P.O. BOX 1472
BOCA GRANDE, FL 33921 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 HOFFMAN, MARK
Address P.O. BOX 1472
City-State-Zip: BOCA GRANDE FL 33921

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: MARK HOFFMAN

MANGER

02/05/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date