

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000051349

Entity Name: SHADOWLAWN LAND MANAGEMENT, LLC

Current Principal Place of Business:

1845 TOWN CENTER BOULEVARD, SUITE 105
FLEMING ISLAND, FL 32003

Current Mailing Address:

1845 TOWN CENTER BOULEVARD, SUITE 105
FLEMING ISLAND, FL 32003 US

FEI Number: 92-2137360

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FITZPATRICK-POWELL, KELLY
1845 TOWN CENTER BOULEVARD, SUITE 105
FLEMING ISLAND, FL 32003 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: KELLY FITZPATRICK-POWELL

08/12/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GEORGE EGAN
Address 1845 TOWN CENTER BOULEVARD,
SUITE 105
City-State-Zip: FLEMING ISLAND FL 32003

Title MGR
Name P. COOPER MURPHY
Address 1845 TOWN CENTER BOULEVARD,
SUITE 105
City-State-Zip: FLEMING ISLAND FL 32003

Title MGR
Name LEAH BURNETTE
Address 1845 TOWN CENTER BOULEVARD,
SUITE 105
City-State-Zip: FLEMING ISLAND FL 32003

Title MGR
Name KELLY FITZPATRICK-POWELL
Address 1845 TOWN CENTER BOULEVARD,
SUITE 105
City-State-Zip: FLEMING ISLAND FL 32003

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: KELLY FITZPATRICK-POWELL

MGR

08/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date