## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000162106

Entity Name: RETIRE 101 LLC

**FILED** Feb 06, 2025 **Secretary of State** 0647645574CC

## **Current Principal Place of Business:**

380 TOWN PLAZA AVENUE SUITE 450

PONTE VEDRA, FL 32081

## **Current Mailing Address:**

380 TOWN PLAZA AVENUE SUITE 450 PONTE VEDRA, FL 32081

FEI Number: 99-1133622 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

BRUCE, LAURA 380 TOWN PLAZA AVENUE SUITE 450

PONTE VEDRA, FL 32081 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 Title MGR

Name SMITH, PAULA W Name CHRISTOPHER, BENTLEY B

380 TOWN PLAZA AVENUE SUITE 450 Address 380 TOWN PLAZA AVENUE SUITE 450 Address

City-State-Zip: PONTE VEDRA FL 32081 City-State-Zip: PONTE VEDRA FL 32081

Title MGR

Name CHRISTOPHER, CHARLES E

380 TOWN PLAZA AVENUE SUITE 450 Address

City-State-Zip: PONTE VEDRA FL 32081

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.

Electronic Signature of Signing Authorized Person(s) Detail