

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000195895

Entity Name: AVALON BY THE SEA, LLC

Current Principal Place of Business:

413 WILLIAMS AVENUE
PORT ST. JOE, FL 32456

Current Mailing Address:

P.O. BOX 98
PORT ST. JOE, FL 32457 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COSTIN, CHARLES A
413 WILLIAMS AVENUE
PORT ST. JOE, FL 32456 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 COSTIN, CHARLES A
Address P.O. BOX 98
City-State-Zip: PORT ST. JOE FL 32457

Title AMBR
Name COSTIN, CHARLES A
Address P.O. BOX
City-State-Zip: PORT ST. JOE FL 32457

Title AMBR
Name COSTIN, TANYA M
Address P.O. BOX 98
City-State-Zip: PORT ST. JOE FL 32457

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: CHARLES A. COSTIN

MANAGER

02/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date