

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000312677

**Entity Name:** CATALINA HOME RENTALS LLC

**Current Principal Place of Business:**

5660 STRAND COURT  
A117  
NAPLES, FL 34110

**Current Mailing Address:**

5660 STRAND COURT  
A117  
NAPLES, FL 34110 US

**FEI Number:** 93-2139507

**Certificate of Status Desired:** No

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

ROBERTS, MICHELLE  
5660 STRAND COURT  
A117  
NAPLES, FL 34110 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            CEO  
Name            ROBERTS, MICHELLE  
Address        5660 STRAND COURT A117  
City-State-Zip: NAPLES FL 34110

Title            COO  
Name            ROBERTS, BENJAMIN  
Address        5660 STRAND COURT A117  
City-State-Zip: NAPLES FL 34110

Title            CFO  
Name            ROBERTS, CHELSEA  
Address        5660 STRAND COURT  
                  A117  
City-State-Zip: NAPLES FL 34110

Title            CHIEF TECHNOLOGY OFFICER  
Name            ROBERTS, TOBIAS  
Address        5660 STRAND COURT  
                  A117  
City-State-Zip: NAPLES FL 34110

*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:** MICHELLE ROBERTS

CEO

05/01/2024

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

\_\_\_\_\_  
Date