## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000330319

Entity Name: ST JOHNS ADVENTURES, LLC

**Current Principal Place of Business:** 

4025 SUNBEAM RD. JACKSONVILLE. FL 32257

**Current Mailing Address:** 

4025 SUNBEAM RD

JACKSONVILLE, FL 32257 US

FEI Number: 93-2921376 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WEAVER, CHRISTOPHER F 4025 SUNBEAM RD JACKSONVILLE, FL 32257 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

FILED Mar 19, 2024

**Secretary of State** 

9791952972CC

Authorized Person(s) Detail:

Title MGR Title AMBR

NameWEAVER, CHRISTOPHER FNameWEAVER, WALTER F IIIAddress4025 SUNBEAM RDAddress4025 SUNBEAM RD.

City-State-Zip: JACKSONVILLE FL 32257 City-State-Zip: JACKSONVILLE FL 32257

Title AMBR

Name KOERNER, JOSHUA
Address 4025 SUNBEAM RD

City-State-Zip: JACKSONVILLE FL 32257

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: CHRISTOPHER F. WEAVER

**MGR** 

03/19/2024