## **2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000003725

Entity Name: PROMENADE JAX OWNER, LLC

**Current Principal Place of Business:** 

1451 HOME STREET C/O CHANCE PARTNERS, LLC JACKSONVILLE, FL 32207

**Current Mailing Address:** 

PO BOX 10292

JACKSONVILLE, FL 32247 US

FEI Number: 84-4878424 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Apr 29, 2021

**Secretary of State** 

1082035369CC

Authorized Person(s) Detail:

Title AP Title AP

NameBOBILIN, JUDDNameROSEN, JEFFERYAddressPO BOX 10292AddressPO BOX 10292

City-State-Zip: JACKSONVILLE FL 32247 City-State-Zip: JACKSONVILLE FL 32247

Title AUTHORIZED REPRESENTATIVE

Name PRITCHARD, ELIZABETH

Address PO BOX 10292

City-State-Zip: JACKSONVILLE FL 32247

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: ELIZABETH PRITCHARD

CONTROLLER

04/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date