

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000501132

**Entity Name:** CHAMPIONS HAVEN, LLC

**Current Principal Place of Business:**

4926 EASTLAKE VISTA DRIVE  
SAINT CLOUD, FL 34771

**Current Mailing Address:**

4926 EASTLAKE VISTA DRIVE  
SAINT CLOUD, FL 34771

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CLARK, MICHELLE T  
4926 EASTLAKE VISTA DR  
SAINT CLOUD, FL 34771 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 AMBR  
Name CLARK, ANDREW J  
Address 4926 EASTLAKE VISTA DR  
City-State-Zip: SAINT CLOUD FL 34771

Title AMBR  
Name CLARK, MICHELLE T  
Address 4926 EASTLAKE VISTA DR  
City-State-Zip: SEATTLE WA 98111

*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 T CLARK

AMBR

02/03/2022

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

\_\_\_\_\_  
Date