

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000007395

**Entity Name:** CORAL FARMS MCS LLC

**Current Principal Place of Business:**

821 CORAL FARMS RD., UNIT 3  
FLORAHOME, FL 32140

**Current Mailing Address:**

P.O. BOX 482  
FLORAHOME, FL 32140

**FEI Number:** 54-2107360

**Certificate of Status Desired:** No

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

SPENCER, CAROL B  
821 CORAL FARMS RD., UNIT 3  
FLORAHOME, FL 32140 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 MGRM  
Name SPENCER, MICHAEL H  
Address 821 CORAL FARMS RD., UNIT 3  
City-State-Zip: FLORAHOME FL 32140

Title MGRM  
Name SPENCER, CAROL B  
Address 821 CORAL FARMS RD., UNIT 3  
City-State-Zip: FLORAHOME FL 32140

*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:** CAROL SPENCER

MGRM

04/30/2024

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

\_\_\_\_\_  
Date