

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000011544

**Entity Name:** MID FLORIDA ROOFING, LLC

**Current Principal Place of Business:**

110 HUNTSWOOD CT.  
LONGWOOD, FL 32750

**Current Mailing Address:**

P.O. BOX 522610  
LONGWOOD, FL 32752

**FEI Number: 56-2345919**

**Certificate of Status Desired:** No

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

SHOEMAKER, ROBERT  
12204 WOODLANDS CIRCLE  
DADE CITY, FL 33525 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 MGR  
Name SHOEMAKER, ROBERT  
Address 12204 WOODLANDS CIRCLE  
City-State-Zip: DADE CITY FL 32752

*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: ROBERT SHOEMAKER**

**MANAGER**

**01/24/2023**

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

\_\_\_\_\_  
Date