

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000023217

**Entity Name:** HEAD FAMILY, LLC

**Current Principal Place of Business:**

3808 MAGNOLIA POINT LANE  
ST. AUGUSTINE, FL 32086

**Current Mailing Address:**

3808 MAGNOLIA POINT LANE  
ST. AUGUSTINE, FL 32086

**FEI Number:** 84-1638245

**Certificate of Status Desired:** No

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

GRIFFIN, TERESA  
3808 MAGNOLIA PT. LANE  
SAINT AUGUSTINE, FL 32086 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 GENERAL MANAGER  
Name GRIFFIN, TERESA D  
Address 7561 A1A SOUTH  
City-State-Zip: SAINT AUGUSTINE FL 32080

Title AUTHORIZED MEMBER  
Name GRIFFIN, EDWARD D II  
Address 444 GIANNA WAY  
City-State-Zip: SAINT AUGUSTINE FL 32086

*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:** TERESA GRIFFIN

**PRES**

**02/22/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date