

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000031131

**Entity Name:** ALLIGATOR POINT RESEARCH CENTER, LLC

**Current Principal Place of Business:**

C/O GREGORY PICKREN  
1401 NORTH MYRTLE AVENUE  
CLEARWATER, FL 33755

**Current Mailing Address:**

C/O GREGORY PICKREN  
1401 NORTH MYRTLE AVENUE  
CLEARWATER, FL 33755

**FEI Number:** 20-0985406

**Certificate of Status Desired:** No

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

PICKREN, GREGORY  
1401 NORTH MYRTLE AVENUE  
CLEARWATER, FL 33755 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 P  
Name PICKREN, GREGORY  
Address 1401 N. MYRTLE AVE.  
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR/MANAGER  
Name SPANN, TERESA  
Address C/O GREGORY PICKREN  
1401 NORTH MYRTLE AVENUE  
City-State-Zip: CLEARWATER FL 33755

*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 SPANN

**CFO**

**01/28/2022**

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

\_\_\_\_\_  
Date