

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000055517

**Entity Name:** 587 NORTH BEACH STREET, LLC

**Current Principal Place of Business:**

1635 N US HWY 1  
UNIT 7235  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

PO BOX 335  
ORMOND BEACH, FL 32175-0335 US

**FEI Number:** 20-1420894

**Certificate of Status Desired:** No

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

PEPE, DEAN G  
1635 N US HWY 1  
UNIT 7235  
ORMOND BEACH, FL 32175-0335 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 ROSSMEYER, SANDRA B  
Address PO BOX 335  
City-State-Zip: ORMOND BEACH FL 32175-0335

Title MANAGER  
Name PEPE, SHELLY R  
Address PO BOX 335  
City-State-Zip: ORMOND BEACH FL 32175

*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:** SHELLY R PEPE

MGR

03/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date