

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000122331

**Entity Name:** BOB LACASSE & COMPANY, LLC

**Current Principal Place of Business:**

448 OLD HAW CREEK RD.  
BUNNELL, FL 32110

**Current Mailing Address:**

448 OLD HAW CREEK RD.  
BUNNELL, FL 32110 US

**FEI Number:** 06-1803090

**Certificate of Status Desired:** No

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

HUDLOW, JUDITH R  
7038 HEMLOCK COURSE  
OCALA, FL 34472 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 LACASSE, ROBERT T  
Address 448 OLD HAW CREEK RD.  
City-State-Zip: BUNNELL FL 32110

Title AMBR  
Name BROWNLEE, APRIL  
Address 448 OLD HAW CREEK RD.  
City-State-Zip: BUNNELL FL 32110

*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 T LACASSE

MGR

04/21/2024

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

\_\_\_\_\_  
Date