

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000049803

**Entity Name:** ACCOUNTANTS PAYROLL GROUP, LLC**Current Principal Place of Business:**6817-601 SOUTHPOINT PARKWAY  
JACKSONVILLE, FL 32216**Current Mailing Address:**6817-601 SOUTHPOINT PARKWAY  
JACKSONVILLE, FL 32216**FEI Number:** 26-0193551**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, BOBBY R JR.  
6817-601 SOUTHPOINT PARKWAY  
JACKSONVILLE, FL 32216 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:** BOBBY R WILLIAMS JR

04/10/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                             |                 |                             |
|-----------------|-----------------------------|-----------------|-----------------------------|
| Title           | MGRM                        | Title           | MGRM                        |
| Name            | WILLIAMS, BOBBY R JR.       | Name            | HOWE, GARY D                |
| Address         | 6817-601 SOUTHPOINT PARKWAY | Address         | 6817-601 SOUTHPOINT PARKWAY |
| City-State-Zip: | JACKSONVILLE FL 32216       | City-State-Zip: | JACKSONVILLE FL 32216       |

*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:** BOBBY R WILLIAMS

MEMBER

04/10/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date