

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000090746

**Entity Name:** 5 APPLES, LLC

**Current Principal Place of Business:**

25877 U.S. 19 NORTH  
CLEARWATER, FL 33763

**Current Mailing Address:**

25877 U.S. 19 NORTH  
CLEARWATER, FL 33763

**FEI Number:** 26-0869025

**Certificate of Status Desired:** No

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

ADAMS, ANTHONY J  
25877 U.S. 19 NORTH  
CLEARWATER, FL 33763 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 DR.  
Name ADAMS, ANTHONY J  
Address 25877 US 19 N  
City-State-Zip: CLEARWATER FL 33763

*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:** ANTHONY J ADAMS DDS

DR

04/21/2021

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

\_\_\_\_\_  
Date