

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000113138

**Entity Name:** 11700 PHILIPS HWY, LLC.

**Current Principal Place of Business:**

8501 COUNTY ROAD 13 NORTH  
SAINT AUGUSTINE, FL 32092

**Current Mailing Address:**

8501 COUNTY ROAD 13 NORTH  
SAINT AUGUSTINE, FL 32092 US

**FEI Number:** 26-1388022

**Certificate of Status Desired:** No

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

REED, LINDA M  
8501 COUNTY ROAD 13 NORTH  
SAINT AUGUSTINE, FL 32092 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	MGRM	Title	MGRM
Name	REED, ROBERT IJR.	Name	REED, LINDA M
Address	8501 COUNTY ROAD 13 NORTH	Address	8501 COUNTY ROAD 13 NORTH
City-State-Zip:	ST. AUGUSTINE FL 32092	City-State-Zip:	ST. AUGUSTINE FL 32092

*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 REED

MGRM

05/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date