## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000008967

Entity Name: CARRERAS INSURANCE AGENCY, LLC

**Current Principal Place of Business:** 

1603 SUN CITY CENTER PLZ SUN CITY CENTER. FL 33573

**Current Mailing Address:** 

4515 RIVER OVERLOOK DR VALRICO, FL 33596 US

FEI Number: 26-2015342 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARRERAS, GILBERT D 4515 RIVER OVERLOOK DR VALRICO, FL 33596 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

FILED Feb 02, 2024

**Secretary of State** 

0656672112CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

Name CARRERAS, GILBERT D Name BRANT, LOTHAIRE

Address 4515 RIVER OVERLOOK DR Address 4515 RIVER OVERLOOK DR

City-State-Zip: VALRICO FL 33596 City-State-Zip: VALRICO FL 33596

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: LOTHAIRE BRANT

Electronic Signature of Signing Authorized Person(s) Detail

02/02/2024

**OWNER** 

Date