

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000050295

**Entity Name:** WESTON FAMILY, LLC

**Current Principal Place of Business:**

12893 QUAILBROOK DRIVE  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

12893 QUAILBROOK DRIVE  
JACKSONVILLE, FL 32224

**FEI Number:** 80-0238066

**Certificate of Status Desired:** No

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

JORGENSEN, MIKE  
241 PARK STREET  
JACKSONVILLE, FL 32204 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  
Name WESTON, MARK H  
Address 11893 QUAILBROOK DRIVE  
City-State-Zip: JACKSONVILLE FL 32224

Title MGRM  
Name WESTON, EDWARD  
Address 315 WHITE TAIL DRIVE  
City-State-Zip: CHAGRIN FALLS OH 44022

*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:** MARK H WESTON

**MANAGER**

**02/27/2024**

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

\_\_\_\_\_  
Date