

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000109456

**Entity Name:** WHITMORE SMSF FL LLC.

**Current Principal Place of Business:**

13 ALLENBY ROAD  
DALKEITH, WALES 6009

**Current Mailing Address:**

213 N STEPHANIE ST  
G-352  
HENDERSON, NV 89074 US

**FEI Number:** 99-0379919

**Certificate of Status Desired:** No

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

AGENTS AND CORPORATIONS, INC.  
539 FIFTH AVENUE SOUTH  
SUITE 330  
NAPLES, FL 34102 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 MGR  
Name CHRISTOPHER WESLEY WHITMORE  
Address 13 ALLENBY ROAD  
City-State-Zip: DALKEITH WALES 6009

*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:** CHRISTOPHER WESLEY WHITMORE

**MEMBER**

**04/28/2023**

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

\_\_\_\_\_  
Date