## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000002886

Entity Name: WATSON C & D, LLC

**Current Principal Place of Business:** 

12890 NE STATE ROAD 24 ARCHER, FL 32618

**Current Mailing Address:** 

12890 NE STATE ROAD 24 ARCHER, FL 32618 US

FEI Number: 59-3680398 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATSON, LARRY 12890 NE STATE ROAD 24 ARCHER, FL 32618 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: LARRY WATSON 02/15/2024

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title OFFICE MANAGER Title GENERAL MANAGER

Name SHEPPARD, BROOKE A Name BACOM, JAMES

Address 12890 NE STATE ROAD 24 Address 12890 NE STATE ROAD 24

City-State-Zip: ARCHER FL 32618 City-State-Zip: ARCHER FL 32618

Title PRESIDENT Title AMBR

Name WATSON, LARRY Name DABNEY, TAMMY

Address 12890 NE STATE ROAD 24 Address 12890 NE STATE RD 24
City-State-Zip: ARCHER FL 32618 City-State-Zip: ACHER FL 32613

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: BROOKE SHEPPARD OFFICE MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

02/15/2024

FILED Feb 15, 2024

**Secretary of State** 

9347919334CC

Date