## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000051825

Entity Name: ANNE M. SHERIDAN L.L.C.

**Current Principal Place of Business:** 

502 S FLORIDA AVE **UNIT 134** 

TARPON SPRINGS, FL 34689

## **Current Mailing Address:**

502 S FLORIDA AVE **UNIT 134** TARPON SPRINGS, FL 34689 US

FEI Number: 46-2542399 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SHERIDAN, ANNE M 502 S FLORIDA AVE **UNIT 134** TARPON SPRINGS, FL 34689 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** Jan 30, 2024

**Secretary of State** 

5547201718CC

Authorized Person(s) Detail:

Title MGR Title **MANAGER** 

HOOD, THOMAS M Name SHERIDAN, ANNE M Name 502 S FLORIDA AVE 502 S FLORIDA AVE Address Address

**UNIT 134 UNIT 134** 

City-State-Zip: TARPON SPRINGS FL 34689 City-State-Zip: TARPON SPRINGS FL 34689

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.