

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000055970

Entity Name: CROXTON ENTERPRISES,LLC**Current Principal Place of Business:**5304 MILE STRETCH DRIVE
HOLIDAY, FL 34690-6060**Current Mailing Address:**5304 MILE STRETCH DRIVE
HOLIDAY, FL 34690-6060 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CROXTON, M R
5304 MILE STRETCH DRIVE
HOLIDAY, FL 34690-6060 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:** M. R CROXTON

04/28/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name CROXTON, ANTHONY O SR.
Address 5304 MILE STRETCH DRIVE
City-State-Zip: HOLIDAY FL 34690-6060

Title CEO
Name CROXTON, M R
Address 5304 MILE STRETCH DRIVE
City-State-Zip: HOLIDAY FL 34690-6060

Title VP
Name CROXTON, ANTHONY ONEAL II
Address 5304 MILE STRETCH DRIVE
City-State-Zip: HOLIDAY FL 34690-6060

Title AUTHORIZED REPRESENTATIVE
Name DIAGNOSTIC MEDICAL TESTING, INC
Address 5304 MILE STRETCH DRIVE
City-State-Zip: HOLIDAY FL 34690-6060

Title OTHER
Name HVM DIAGNOSTICS INC
Address 5304 MILE STRETCH DRIVE
City-State-Zip: HOLIDAY FL 34690-6060

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: M R CROXTON

CEO

04/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date