

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000108952

**Entity Name:** ABR FLORIDA, LLC

**Current Principal Place of Business:**

639 AVENUE A NW  
WINTER HAVEN, FL 33881

**Current Mailing Address:**

1096 BERKSHIRE LANE  
BARRINGTON, IL 60010 US

**FEI Number:** 47-1319423

**Certificate of Status Desired:** No

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

LAVIN, JOHN  
639 AVENUE A NW  
WINTER HAVEN, FL 33881 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            AMBR  
Name            LAVIN, JOHN  
Address        639 AVENUE A NW  
City-State-Zip: WINTER HAVEN FL 33881

*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:** JOHN LAVIN

AMBR

01/18/2023

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

\_\_\_\_\_ Date