

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000109625

**Entity Name:** LARRY LAWRENCE SHOW, LLC

**Current Principal Place of Business:**

4011 SCHOOL CIR  
LABELLE, FL 33935

**Current Mailing Address:**

PO BOX 1672  
PINE LAKE , GA 30072 US

**FEI Number:** 47-4409775

**Certificate of Status Desired:** No

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

LAWRENCE, HUMPHREY L  
4011 SCHOOL CIR  
LABELLE, FL 33935 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:** HUMPHREY LAWRENCE

04/25/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            OWNER  
Name            LAWRENCE, HUMPHREY LLOYD  
Address        PO BOX 596  
City-State-Zip: LABELLE FL 33975

*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:** HUMPHREY LAWRENCE

OWNER

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date