

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000004415

**Entity Name:** BROOKER EQUIPMENT LLC

**Current Principal Place of Business:**

2848 BASIL AVE SW  
PALM BAY, FL 32908

**Current Mailing Address:**

2170 SW CONANT AVE  
PORT ST LUCIE, FL 34953 US

**FEI Number:** 81-1114058

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 AUTHORIZED REPRESENTATIVE  
Name BROOKER, KYLE S  
Address 1404 SEAHOUSE ST  
City-State-Zip: SEBASTIAN FL 32958

Title AMBR  
Name BROOKER EQUIPMENT LLC  
Address 2848 BASIL AVE SW  
City-State-Zip: PALM BAY FL 32908

*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:** KYLE S. BROOKER

**AUTHORIZED PERSON**

**04/29/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date