

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000036058

**Entity Name:** LKP GROUP CPA'S PLLC

**Current Principal Place of Business:**

8833 PERIMETER PARK BLVD  
SUITE 504  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

8833 PERIMETER PARK BLVD  
SUITE 504  
JACKSONVILLE, FL 32216 US

**FEI Number:** 81-2681739

**Certificate of Status Desired:** No

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

PILGRIM, LISA K  
8833 PERIMETER PARK BLVD  
SUITE 504  
JACKSONVILLE, FL 32216 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	MGR	Title	MBR
Name	PILGRIM, LISA K	Name	BARLEY, DAVID CPA
Address	149 CANDLEBARK DR.	Address	5150 BELFORT ROAD, BLDG. 400
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32256

*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:** LISA PILGRIM

**MANAGER**

**04/27/2022**

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

\_\_\_\_\_  
Date