

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000118577

Entity Name: TAILS WAGGIN CAMP LLC

Current Principal Place of Business:

700 OTIS ROAD
JACKSONVILLE, FL 32220

Current Mailing Address:

700 OTIS RD.
JACKSONVILLE, FL 32220 US

FEI Number: 81-3032855

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEASE, MEGHAN N
700 OTIS RD
JACKSONVILLE, FL 32220 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 PEASE, MEGHAN N
Address 4756 TARA WOODS DR E
City-State-Zip: JACKSONVILLE FL 32210

Title AMBR
Name PEASE, PAUL E
Address 4756 TARA WOODS DR E
City-State-Zip: JACKSONVILLE FL 32210

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: MEGHAN PEASE

MEMBER

06/21/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date