

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000189281

**Entity Name:** O'BRIEN CONSTRUCTION COMPANY OF CENTRAL FLORIDA, LLC

**FILED**  
**Apr 03, 2024**  
**Secretary of State**  
**8009464517CC**

**Current Principal Place of Business:**

13829 CR 448  
TAVARES, FL 32778

**Current Mailing Address:**

13829 CR 448  
TAVARES, FL 32778 US

**FEI Number: 82-2727094**

**Certificate of Status Desired: No**

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

O'BRIEN, DYLAN  
13829 CR 448  
TAVARES, FL 32778 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            O'BRIEN, DYLAN  
Address        13829 CR 448  
City-State-Zip: TAVARES FL 32778

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: O'BRIEN DYLAN**

**AMBR**

**04/03/2024**

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

\_\_\_\_\_  
Date