

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000225553

**Entity Name:** SHEPARD'S GATE LLC

**Current Principal Place of Business:**

2113 SILVER LEAF CT  
LONGWOOD, FL 32779

**Current Mailing Address:**

2113 SILVER LEAF CT  
LONGWOOD, FL 32779 US

**FEI Number:** 46-5089903

**Certificate of Status Desired:** No

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

SHEPARD, CARRIE  
2113 SILVER LEAF CT  
LONGWOOD, FL 32779 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	AP
Name	SHEPARD, CARRIE	Name	SKANE, ADRIAN K CPA
Address	2113 SILVER LEAF CT	Address	3000 GULF TO BAY BLVD SUITE 315
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	CLEARWATER FL 33759

*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:** SHEPARD, CARRIE

**MGR**

**04/20/2023**

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

\_\_\_\_\_  
Date