## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000262972

Entity Name: BASKETS OF DREAMS LLC

**Current Principal Place of Business:** 

232 DELRAY DR PENSACOLA, FL 32507

**FILED** Jan 08, 2021 **Secretary of State** 0438410784CC

## **Current Mailing Address:**

232 DELRAY DR

PENSACOLA, FL 32507 US

FEI Number: 80-0419411 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CHRISTINA POWERS TAX 1805 CREIGHTON RD STE 5 PMB 212 PENSACOLA, FL 32504 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: CHRISTINA POWERS 01/08/2021

> Date Electronic Signature of Registered Agent

## Authorized Person(s) Detail:

Title **AMBR** 

THOMPSON, MARLENE Name Address 232 DELRAY DRIVE City-State-Zip: PENSACOLA FL 32507

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: MARLENE R. THOMPSON

Electronic Signature of Signing Authorized Person(s) Detail

**OWNER** 

01/08/2021