

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000155265

**Entity Name:** BLAKELEE LLC

**Current Principal Place of Business:**

646 N COMBEE RD  
LAKELAND, FL 33801

**Current Mailing Address:**

646 N COMBEE RD  
LAKELAND, FL 33801 US

**FEI Number:** 83-1375338

**Certificate of Status Desired:** No

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

CROOMS, KRISTY N  
646 N COMBEE RD  
LAKELAND, FL 33809 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  
Name CROOMS, HAROLD R II  
Address 646 N COMBEE RD  
City-State-Zip: LAKELAND FL 33801

Title AMBR  
Name CROOMS, BLAKE L  
Address 646 N COMBEE RD  
City-State-Zip: LAKELAND FL 33801

Title AMBR  
Name CROOMS, KIMBER M  
Address 646 N COMBEE RD  
City-State-Zip: LAKELAND FL 33801

Title MANGER  
Name CROOMS, KRISTY  
Address 646 N COMBEE RD  
City-State-Zip: LAKELAND FL 33801

*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:** KRISTY CROOMS

**MANAGER**

**02/07/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date