

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000207559

**Entity Name:** KASPER ENTERPRISES GROUP, LLC

**Current Principal Place of Business:**

8518 COLONY TRACE DRIVE  
FT. MYERS, FL 33908

**Current Mailing Address:**

8518 COLONY TRACE DRIVE  
FT. MYERS, FL 33908 US

**FEI Number:** 83-1981415

**Certificate of Status Desired:** Yes

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

VOIGT LAW GROUP, P.A.  
2042 BEE RIDGE ROAD  
SARASOTA, FL 34239 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 KASPER, WALTER A JR.  
Address 13291 HAMPTON PARK COURT  
City-State-Zip: FT. MYERS FL 33913

Title MGR  
Name KASPER, CAROLE A  
Address 13291 HAMPTON PARK COURT  
City-State-Zip: FT. MYERS FL 33913

Title AMBR  
Name KASPER, LORI ANN  
Address 8518 COLONY TRACE DRIVE  
City-State-Zip: FT. MYERS FL 33908

Title AMBR  
Name POND, DANIEL  
Address 8518 COLONY TRACE DRIVE  
City-State-Zip: FT. MYERS FL 33908

*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:** WALTER KASPER

**MANAGER**

**02/01/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date