

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000276513

**Entity Name:** MCCREA WORKS LLC

**Current Principal Place of Business:**

1546 MCLAWRENCE WAY  
TALLAHASSEE, FL 32317

**Current Mailing Address:**

1546 MCLAWRENCE WAY  
TALLAHASSEE, FL 32317 US

**FEI Number:** 83-3026368

**Certificate of Status Desired:** No

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

MCCREA, TIEBOUT S  
1546 MCLAWRENCE WAY  
TALLAHASSEE, FL 32317 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	MGR
Name	MCCREA, TIEBOUT S	Name	MCCREA, REBEKAH P
Address	1546 MCLAWRENCE WAY	Address	1546 MCLAWRENCE WAY
City-State-Zip:	TALLAHASSEE FL 32317	City-State-Zip:	TALLAHASSEE FL 32317

*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:** TIEBOUT MCCREA

**MGR**

**03/27/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date