## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000287113

Entity Name: WILSON TRAINING & BLOODSTOCK LLC

**Current Principal Place of Business:** 

22220 WOLF BRANCH RD SORRENTO. FL 32776

**Current Mailing Address:** 

22220 WOLF BRANCH RD SORRENTO, FL 32776 US

FEI Number: 83-2856955 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILSON, MICHAEL D 22220 WOLF BRANCH RD SORRENTO, FL 32776 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

FILED Jan 09, 2025

**Secretary of State** 

7763986388CC

Authorized Person(s) Detail:

Title MGR Title WIFE

NameWILSON, MICHAEL DNameTOYE, ASHLEY LAURENAddress22220 WOLF BRANCH RDAddress22220 WOLF BRANCH RDCity-State-Zip:SORRENTO FL 32776City-State-Zip:SORRENTO FL 32776

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: MICHAEL WILSON PRINCIPLE

Electronic Signature of Signing Authorized Person(s) Detail

01/09/2025 Date