

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000046550

**Entity Name:** BROBERTS COUNSULTING LLC

**Current Principal Place of Business:**

32801 US HWY 441N  
265  
OKEECHOBEE, FL 34972

**Current Mailing Address:**

32801 US HWY 441N  
265  
OKEECHOBEE, FL 34972 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ROBERTS, B  
32801 US HWY 441N  
265  
OKEECHOBEE, FL 34972 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            CEO  
Name            ROBERTS, B  
Address        32801 US HWY 441N #265  
City-State-Zip: OKEECHOBEE FL 34972

Title            PRES  
Name            EDMONDS, WILLIAM S JR.  
Address        1022 VANNESSA DR.  
City-State-Zip: OVIEDO FL 32765

*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:** ROBERTS, BARBARA

**SECERTARY**

**03/13/2025**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date