

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000078352

**Entity Name:** LEONA'S HATS, LLC

**Current Principal Place of Business:**

505 GREG ST  
VALRICO, FL 33594

**Current Mailing Address:**

505 GREG ST  
VALRICO, FL 33594 UN

**FEI Number:** 83-4258185

**Certificate of Status Desired:** No

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

WILLIAMS, CHARLES A JR  
505 GREG ST  
VALRICO, FL 33594 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 WILLIAMS, CATRICE L  
Address 505 GREG ST  
City-State-Zip: VALRICO FL 33594

Title AMBR  
Name DUBERRY, LEONA  
Address 3302 N. 34TH ST  
City-State-Zip: TAMPA FL 33605

Title AMBR  
Name BARBER-LEE, SHIRLEY A  
Address 710 S. 57TH ST APT A  
City-State-Zip: TAMPA FL 33619

Title AMBR  
Name WILLIAMS HOLDINGS INVESTMENT GROUP, LLC  
Address 505 GREG ST  
City-State-Zip: VALRICO FL 33594

*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:** CATRICE L WILLIAMS

MGR

04/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date