

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000127858

**Entity Name:** POWER PROS ELECTRICAL SERVICE LLC

**Current Principal Place of Business:**

4375 SHERBORNE ROAD  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

PO BOX 180386  
TALLAHASSEE, FL 32318 US

**FEI Number: 85-1108414**

**Certificate of Status Desired: No**

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

BIBBEE JR, ROBERT B  
4375 SHERBORNE ROAD  
TALLAHASSEE, FL 32303 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: ROBERT BIBBEE JR**

**02/05/2024**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name BIBBEE, ROBERT B JR  
Address 4390 SHEREBORNE ROAD  
City-State-Zip: TALLAHASSEE FL 32303

Title CEO  
Name BIBBEE, ROBERT B JR  
Address 4390 SHEREBORNE ROAD  
City-State-Zip: TALLAHASSEE FL 32303

Title AMBR  
Name BRYAN, STEVEN K  
Address P.O. BOX 2512  
City-State-Zip: HAVANA FL 32333

Title CAO  
Name BRYAN, STEVEN K  
Address P.O. BOX 2512  
City-State-Zip: HAVANA FL 32333

*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: ROBERT BIBBEE JR**

**PRESIDENT**

**02/05/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date