# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L20000314277

#### Entity Name: STAGGWOOD, LLC

### Current Principal Place of Business:

409 SW SYCAMORE COVE PORT ST LUCIE, FL 34986

# **Current Mailing Address:**

409 SW SYCAMORE COVE PORT ST LUCIE, FL 34986

# FEI Number: 46-5756032

### Name and Address of Current Registered Agent:

STAGG, KEVIN 409 SW SYCAMORE COVE PORT ST LUCIE, FL 34986 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

## Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	STAGG, KEVIN	Name	STAGG, AMANDA
Address	409 SW SYCAMORE COVE	Address	409 SW SYCAMORE COVE
City-State-Zip:	PORT ST LUCIE FL 34986	City-State-Zip:	PORT ST LUCIE FL 34986

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: AMANDA STAGG

MANAGER

02/13/2024 Date

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Feb 13, 2024 Secretary of State 1669679408CC

Certificate of Status Desired: No

Date