

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000040462

**Entity Name:** MCALLISTER PACKAGING, LLC**Current Principal Place of Business:**6755 SE BARRINGTON DR.  
STUART, FL 34997**Current Mailing Address:**6755 SE BARRINGTON DR.  
STUART, FL 34997 US**FEI Number:** 86-1732705**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCALLISTER, CHARLES D  
6755 SE BARRINGTON DR.  
STUART, FL 34997 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 MCALLISTER, CHARLES D  
Address 6755 SE BARRINGTON DR.  
City-State-Zip: STUART FL 34997

Title AMBR  
Name MCALLISTER, CHARLES D  
Address 6755 SE BARRINGTON DR.  
City-State-Zip: STUART FL 34997

Title MGR  
Name MCALLISTER, SUSAN I  
Address 6755 SE BARRINGTON DR.  
City-State-Zip: STUART FL 34997

Title AMBR  
Name MCALLISTER, SUSAN I  
Address 6755 SE BARRINGTON DR.  
City-State-Zip: STUART FL 34997

*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:** SUSAN MCALLISTER

MGR

03/19/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date