

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000128707

**Entity Name:** FORKAY, LLC

**Current Principal Place of Business:**

420 NORTH DONNELLY STREET  
MOUNT DORA, FL 32757-5527

**Current Mailing Address:**

420 NORTH DONNELLY STREET  
MOUNT DORA, FL 32757-5527 US

**FEI Number:** 86-2991915

**Certificate of Status Desired:** No

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

SHIPLEY LAW FIRM  
20110 U.S. HIGHWAY 441  
SUITE A  
MOUNT DORA, FL 32757-6901 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 HAUSER, KAREN M  
Address 420 NORTH DONNELLY STREET  
City-State-Zip: MOUNT DORA FL 32757-5527

Title MGR  
Name KLUESENER, RICHARD  
Address 420 NORTH DONNELLY STREET  
City-State-Zip: MOUNT DORA FL 32757-5527

Title MGR  
Name KLUESENER, CHERYL A  
Address 420 NORTH DONNELLY STREET  
City-State-Zip: MOUNT DORA FL 32757-5527

Title MGR  
Name KLUESENER, KENNAN  
Address 420 NORTH DONNELLY STREET  
City-State-Zip: MOUNT DORA FL 32757-5527

*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:** RICHARD KLUESENER

**MANAGER**

**02/23/2023**

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

\_\_\_\_\_  
Date