

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000152395

**Entity Name:** KEIKES LLC

**Current Principal Place of Business:**

31615 LONG ACRES DRIVE  
SORRENTO, FL 32776

**Current Mailing Address:**

PO BOX 1449  
SORRENTO, FL 32776 UN

**FEI Number:** 86-3329277

**Certificate of Status Desired:** No

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

KEIKES, WILLIAM  
31629 LONG ACRES DRIVE  
SUITE 1  
SORRENTO, FL 32776 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:** WILLIAM KEIKES

02/16/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title ASST. TREASURER  
Name KEIKES, JOANNE  
Address PO BOX 1449  
City-State-Zip: SORRENTO FL 32776

*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:** JOANNE KEIKES

TREASURER

02/16/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date