

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000308664

**Entity Name:** 502 PALM, LLC

**Current Principal Place of Business:**

520 GULF BLVD  
BELLEAIR SHORES, FL 33786

**Current Mailing Address:**

520 GULF BLVD  
BELLEAIR SHORES, FL 33786

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CALLAS, ANNA MARIA  
520 GULF BLVD  
BELLEAIR SHORES, FL 33786 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 CALLAS, ANNA MARIA  
Address 520 GULF BLVD  
City-State-Zip: BELLEAIR SHORES FL 33786

Title AMBR  
Name CALLAS, MARIA  
Address 520 GULF BLVD  
City-State-Zip: BELLEAIR SHORES FL 33786

Title AMBR  
Name CALLAS, CHRIS  
Address 520 GULF BLVD  
City-State-Zip: BELLEAIR SHORES FL 33786

*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:** ANNA MARIA CALLAS

**MGR**

**03/01/2024**

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

\_\_\_\_\_  
Date