

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000350147

Entity Name: KOABD LLC

Current Principal Place of Business:

9378 FOXGLOVE LANE
NAPLES, FL 34120

Current Mailing Address:

9378 FOXGLOVE LANE
NAPLES, FL 34120 US

FEI Number: 87-2131707

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BLANK, MATTHEW J
9378 FOXGLOVE LANE
NAPLES, FL 34120 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: MATTHEW J BLANK

02/22/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER	Title	AUTHORIZED REPRESENTATIVE
Name	BLANK, MATTHEW J	Name	BLANK, HEATHER R
Address	9378 FOXGLOVE LANE	Address	9378 FOXGLOVE LANE
City-State-Zip:	NAPLES 34120	City-State-Zip:	NAPLES 34120
Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED REPRESENTATIVE
Name	BLANK, DAVID M	Name	BLANK, JOHN C
Address	9378 FOXGLOVE LANE	Address	9378 FOXGLOVE LANE
City-State-Zip:	NAPLES FL 34120	City-State-Zip:	NAPLES FL 34120
Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED REPRESENTATIVE
Name	BLANK, ALYSSA C	Name	BLANK, DILLON G
Address	9378 FOXGLOVE LANE	Address	9378 FOXGLOVE LANE
City-State-Zip:	NAPLES FL 34120	City-State-Zip:	NAPLES FL 34120
Title	AUTHORIZED REPRESENTATIVE		
Name	BLANK, DALTON G		
Address	9378 FOXGLOVE LANE		
City-State-Zip:	NAPLES FL 34120		

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: MATTHEW J BLANK

MANAGER

02/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date