

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000030018

**Entity Name:** LAND OWNERS 11315 LLC

**Current Principal Place of Business:**

19220 EARLY VIOLET DR  
TAMPA, FL 33647

**Current Mailing Address:**

19220 EARLY VIOLET DR  
TAMPA, FL 33647 US

**FEI Number:** 87-4741520

**Certificate of Status Desired:** No

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

PALAKURTY, VENKATA  
19220 EARLY VIOLET DR  
TAMPA, FL 33647 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 PALAKURTY, VENKATA  
Address 19220 EARLY VIOLET DR  
City-State-Zip: TAMPA FL 33647

Title MGR  
Name DUNDIGALLA, RAJITHA  
Address 12706 EAGLES ENTRY DR  
City-State-Zip: ODESSA FL 33556

Title MGR  
Name KOTHAPALLI, SRIDHAR  
Address 13024 EAGLES ENTRY DR  
City-State-Zip: ODESSA FL 33556

Title MGR  
Name RAMAKA, RAJESHWAR  
Address 16306 MUIRFIELD DR  
City-State-Zip: ODESSA FL 33556

Title MGR  
Name VEMULA, SRIKANTH  
Address 19211 CLIMBING ASTER DR  
City-State-Zip: TAMPA FL 33647

Title MGR  
Name SANTOSH, GUDURU  
Address 12827 STANWYCK CIR  
City-State-Zip: TAMPA FL 33626

*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:** VENKATA PALAKURTY

**MANAGER**

**04/16/2024**

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

\_\_\_\_\_  
Date