

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000036366

**Entity Name:** TRACY BISHOP, LLC

**Current Principal Place of Business:**

250 CHERRY RIDGE DR  
APT 1313  
JACKSONVILLE, FL 32222

**Current Mailing Address:**

250 CHERRY RIDGE DR  
APT 1313  
JACKSONVILLE, FL 32222

**FEI Number:** 92-2748138

**Certificate of Status Desired:** Yes

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

BISHOP, TRACY A  
250 CHERRY RIDGE DR  
APT 1313  
JACKSONVILLE, FL 32222 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            OWNER  
Name            TRACY BISHOP, LLC  
Address        250 CHERRY RIDGE DR  
                  APT 1313  
City-State-Zip: JACKSONVILLE FL 32222

*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:** TRACY BISHOP

**OWNER**

**04/26/2023**

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

\_\_\_\_\_  
Date