

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000059377

**Entity Name:** 3093 LLC.

**Current Principal Place of Business:**

3093 N TURKEY OAK DR.  
CRYSTAL RIVER, FL 34428

**Current Mailing Address:**

2800 COVE CAY DR.  
4-G  
CLEARWATER, FL 33760 UN

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HOLDEN, WILLIAM  
2800 COVE CAY DRIVE  
# 4 G  
CLEARWATER, FL 33760 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 HOLDEN, WILLIAM E  
Address 2800 COVE CAY DR 4-G, 4-G  
City-State-Zip: CLEARWATER FL 33760

Title AP  
Name HOLDEN, WENDY M  
Address 2800 COVE CAY DR. 4-G  
City-State-Zip: CLEARWATER FL 33760

Title AP  
Name STOCKFISCH, JOANN B  
Address 2800 COVE CAY DRIVE, # 6-F  
City-State-Zip: CLEARWATER FL 33760

*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:** WILLIAM HOLDEN

MGR

04/30/2023

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

\_\_\_\_\_ Date