

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000064608

**Entity Name:** SIMON FAMILY TRUST LLC

**Current Principal Place of Business:**

1153 2ND AVE S  
TIERRA VERDE, FL 33715

**Current Mailing Address:**

1153 2ND AVE S  
TIERRA VERDE, FL 33715 US

**FEI Number:** 88-0531638

**Certificate of Status Desired:** No

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

SIMON, PAUL J  
1153 2ND AVE S  
TIERRA VERDE, FL 33715 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 SIMON, PAUL J  
Address 1153 2ND AVE S  
City-State-Zip: TIERRA VERDE FL 33715

Title MGR  
Name SIMON, DEBORAH A  
Address 1153 2ND AVE S  
City-State-Zip: TIERRA VERDE FL 33715

*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:** PAUL SIMON

**MANAGER**

**04/04/2025**

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

\_\_\_\_\_  
Date