## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000359074

Entity Name: 7909 ALLAMANDA LLC

**Current Principal Place of Business:** 

4709 N. LOIS AVE. TAMPA, FL 33614

**Current Mailing Address:** 

4709 N. LOIS AVE. TAMPA, FL 33614

FEI Number: 88-3779680 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EGAN, MATTHEW 4709 N. LOIS AVE. TAMPA, FL 33614 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

FILED Jan 20, 2023

**Secretary of State** 

5126221629CC

Authorized Person(s) Detail:

Title MGR Title MGR

NameDEFRANCO, JOSEPHNameEGAN, SHARONAddress4709 N LOIS AVE.Address4709 N LOIS AVE.City-State-Zip:TAMPA FL 33614City-State-Zip:TAMPA FL 33614

Title MGR

Name EGAN, MATTHEW Address 4709 N LOIS AVE. City-State-Zip: TAMPA FL 33614

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 EGAN

**MANAGER** 

01/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date