

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000405639

**Entity Name:** BLOMGREN TRUST, LLC

**Current Principal Place of Business:**

42 ROBALO COURT  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

901 SW MARTIN DOWNS BLVD  
SUITE 205  
PALM CITY, FL 34990 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LAW OFFICES OF JOHN MANGAN, P.A.  
901 SW MARTIN DOWNS BLVD  
SUITE 205  
PALM CITY, FL 34990 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                       | Title           | AMBR                      |
| Name            | BLOMGREN, CARL D JR.      | Name            | BALBONI, JACQUELINE       |
| Address         | 42 ROBALO COURT           | Address         | 42 ROBALO COURT           |
| City-State-Zip: | NORTH PALM BEACH FL 33408 | City-State-Zip: | NORTH PALM BEACH FL 33408 |

*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:** CARL D BLOMGREN JR

MGR

04/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date