

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000454211

**Entity Name:** BGS RE PARTNERS, LLC

**Current Principal Place of Business:**

1768 OLEANDER PLACE  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

1768 OLEANDER PLACE  
JACKSONVILLE, FL 32210 US

**FEI Number:** 92-0880213

**Certificate of Status Desired:** No

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

ARMADA, KRISTY  
2426 EAST LAS OLAS BLVD.  
FORT LAUDERDALE, FL 33301 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 AMBR  
Name LAURA BRIGGLE  
Address 361 SE 8TH ST  
City-State-Zip: POMPANO BEACH FL 33060

Title AMBR  
Name HELEN CARRIE SMITH  
Address 1768 OLEANDER PLACE  
City-State-Zip: JACKSONVILLE FL 32210

Title AMBR  
Name TERESA GRASHOF  
Address 44 RIVER DR.  
City-State-Zip: TEQUESTA FL 33469

*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:** LAURA BRIGGLE

**AUTHORIZED MEMBER**

**01/31/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date