

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000514295

**Entity Name:** SANDERS CPA LLC

**Current Principal Place of Business:**

4851 TAMIAMI TRL N STE 200  
NAPLES, FL 34103

**Current Mailing Address:**

4851 TAMIAMI TRL N STE 200  
NAPLES, FL 34103 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SANDERS, GARY  
4851 TAMIAMI TRL N STE 200  
NAPLES, FL 34103 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:** GARY SANDERS

05/01/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SANDERS, GARY  
Address 11720 PEONY TER  
City-State-Zip: NAPLES FL 34120

*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:** GARY SANDERS

MEMBER

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date