

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000529447

Entity Name: 905 BELLEAIR LLC

Current Principal Place of Business:

905 PONCE DELEON BLVD
BELLEAIR, FL 33756

Current Mailing Address:

PO BOX 491
RIVERVIEW, FL 33568

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WISDOM, KHAREY
905 PONCE DELEON BLVD
BELLEAIR, FL 33756 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 WISDOM, KHAREY
Address PO BOX 491
City-State-Zip: RIVERVIEW FL 33568

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: KHAREY WISDOM

MGR

03/03/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date