

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000022602

**Entity Name:** RESICOMM PROPERTY INSPECTIONS LLC

**Current Principal Place of Business:**

6339 LANDINGS TERRACE  
TAMARAC, FL 33321

**Current Mailing Address:**

6339 LANDINGS TERRACE  
TAMARAC, FL 33321 US

**FEI Number:** 92-2415939

**Certificate of Status Desired:** No

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

SMITH, DAVE A MR.  
6339 LANDINGS TERACE  
TAMARAC, FL 33321 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 SMITH, DAVE A MR.  
Address 6339 LANDINGS TERRACE  
City-State-Zip: TAMARAC FL 33321

Title MGR  
Name BIRCH, DAVONNAE S MRS,  
Address 24 FAIR OAKS CIRCLE  
City-State-Zip: ORMOND BEACH FL 32174

Title MGR  
Name SPENCER, SHANNAE K MRS.  
Address 6339 LANDINGS TERRACE  
City-State-Zip: TAMARAC FL 33321

Title AR  
Name SMITH, DONNA M MRS.  
Address 6339 LANDINGS TERRACE  
City-State-Zip: TAMARAC FL 33321

*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:** DAVE AUDLEY ST. GEORGE SMITH

MR.

04/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date