

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000138054

**Entity Name:** CRESCENT POINTE LLC

**Current Principal Place of Business:**

7898 SHEPPARD LANE  
ZEPHYRHILLS, FL 33540

**Current Mailing Address:**

7839 PONDS EDGE LANE  
ZEPHYRHILLS, FL 33540 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ALKISHAWI, AZUCENA MRS.  
7839 PONDS EDGE LANE  
ZEPHYRHILLS, FL 33540 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 ALKISHAWI, AZUCENA MRS  
Address 7839 PONDS EDGE LANE  
City-State-Zip: ZEPHYRHILLS FL 33540

*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:** AZUCENA ALKISHAWI

**MANAGER**

**02/27/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date