

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000154327

**Entity Name:** 423 EAST 15TH STREET, LLC

**Current Principal Place of Business:**

17216 PANAMA CITY BEACH PARKWAY  
PANAMA CITY BEACH, FL 32413

**Current Mailing Address:**

17216 PANAMA CITY BEACH PARKWAY  
PANAMA CITY BEACH, FL 32413 US

**FEI Number:** 92-3477804

**Certificate of Status Desired:** No

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

FAISON, BRENT  
17216 PANAMA CITY BEACH PARKWAY  
PANAMA CITY BEACH, FL 32413 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 FAISON, BRENT  
Address 17216 PANAMA CITY BEACH  
PARKWAY  
City-State-Zip: PANAMA CITY BEACH FL 32413

Title MGR  
Name JONES, PATRICK  
Address 17216 PANAMA CITY BEACH  
PARKWAY  
City-State-Zip: PANAMA CITY BEACH FL 32413

Title MGR  
Name LLOYD, WILLIAM P JR.  
Address 5075 NORTH LAGOON DRIVE  
City-State-Zip: PANAMA CITY BEACH FL 32408

Title MGR  
Name LLOYD, JON R  
Address 2639 FEROL LANE  
City-State-Zip: LYNN HAVEN FL 32444

*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:** JON R. LLOYD

**MANAGER**

**03/27/2024**

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

\_\_\_\_\_  
Date