## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000423255

Entity Name: SKYWAY ANIMAL HOSPITAL LLC

**Current Principal Place of Business:** 

3258 FIFTH AVENUE SOUTH SAINT PETERSBURG. FL 33712

**Current Mailing Address:** 

3258 FIFTH AVENUE SOUTH SAINT PETERSBURG, FL 33712 US

FEI Number: 93-3404849 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TIMOTHY C. DAILY CPA, PA 585 SOUTH DUNCAN AVE. CLEARWATER, 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

FILED Jan 22, 2024

**Secretary of State** 

5029939059CC

## Authorized Person(s) Detail:

Title MANAGER

Name CHATANI, RAVI C

Address 3258 FIFTH AVENUE SOUTH

City-State-Zip: SAINT PETERSBURG FL 33712

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: RAVI CHATANI MANAGER 01/22/2024