## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000466698

Entity Name: SIMULATIONS.COM LLC

**Current Principal Place of Business:** 

9431 N HOLLAND RD. SOUTHPORT, FL 32409

**Current Mailing Address:** 

9431 N HOLLAND RD. SOUTHPORT, FL 32409 US

FEI Number: 93-3827930 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHARN, REBECCA 12232 LYNDELL PLANTATION DR PANAMA CITY BEACH, FL 32407 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** Apr 18, 2024

**Secretary of State** 

8286536986CC

## Authorized Person(s) Detail:

Title **TREASURER** Title AR

SCHARN, REBECCA Name MCGEE, JACQUELINE Name 12232 LYNDELL PLANTATION DR Address Address 9431 N HOLLAND RD. City-State-Zip: PANAMA CITY BEACH FL 32407 City-State-Zip: SOUTHPORT FL 32409

Title CEO - MEMBER Title MANAGING DIRECTOR - MEMBER Name MCGEE, BRIAN Name ACOSTA, DAVID

Address 9431 N HOLLAND RD. Address 360 RIDGEMONT DR. SOUTHPORT FL 32409 City-State-Zip: EL PASO TX 79912 City-State-Zip:

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.

CEO

SIGNATURE: BRIAN MCGEE

Electronic Signature of Signing Authorized Person(s) Detail