

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000509534

**Entity Name:** F & D FAMILY SERVICES LLC

**Current Principal Place of Business:**

6312 US HIGHWAY 17 92 N  
DAVENPORT, FL 33896--976

**Current Mailing Address:**

6312 US HIGHWAY 17 92 N  
DAVENPORT, FL 33896--976 UN

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CRUZ, ANGELICA L  
6312 US HWY 17-92 N  
DAVENPORT, FL 33896 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 CRUZ, ANGELICA  
Address 6312 US HIGHWAY 17 92 N  
City-State-Zip: DAVENPORT FL 33896--976

Title AMBR  
Name NUNEZ, ANGELIQUE B  
Address 6312 US HIGHWAY 17 92 N  
City-State-Zip: DAVENPORT FL 33896

Title AP  
Name NUNEZ, DANIEL A  
Address 6312 US HIGHWAY 17 92 N  
City-State-Zip: DAVENPORT FL 33896--976

*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:** ANGELICA CRUZ

MGR

04/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date