

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000000951

**Entity Name:** LOGSDON/NICOLINI OF TAMPA LIMITED COMPANY

**Current Principal Place of Business:**

20310 HERITAGE POINT DR.  
TAMPA, FL 33647

**Current Mailing Address:**

P.O. BOX 48903  
TAMPA, FL 33646 US

**FEI Number:** 59-3572136

**Certificate of Status Desired:** No

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

NICOLINI, DON  
20310 HERITAGE POINT DRIVE  
TAMPA, FL 33647 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:** DON NICOLINI

01/08/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER, AUTHORIZED MEMBER  
Name           NICOLINI, DONALD  
Address        20310 HERITAGE POINT DRIVE  
City-State-Zip: TAMPA FL 33647

Title           AUTHORIZED MEMBER  
Name           LOGSDON, JOHN  
Address        640 CLEMATIS ST., 308  
City-State-Zip: WEST PALM BEACH FL 33401

Title           AUTHORIZED MEMBER  
Name           NICOLINI, PATRICK  
Address        P. O. BOX 1801  
City-State-Zip: DADE CITY FL 33526

*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:** DONALD NICOLINI

MANAGER

01/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date