

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000034320

**Entity Name:** ABBOTT & ANDREWS REALTY, LLC

**Current Principal Place of Business:**

850 NW 13TH AVENUE  
PORTLAND, OR 97209

**Current Mailing Address:**

PO BOX 98788  
LAS VEGAS, NV 89193 US

**FEI Number:** 65-1176006

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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 SECRETARY  
Name SCHUMAN, BRUCE  
Address 850 NW 13TH AVENUE  
City-State-Zip: PORTLAND OR 97209

Title MANAGER  
Name MILNE, BOB  
Address 850 NW 13TH AVENUE  
City-State-Zip: PORTLAND OR 97209

Title MANAGER  
Name SCHUMAN, BRUCE  
Address 850 NW 13TH AVENUE  
City-State-Zip: PORTLAND OR 97209

*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:** BRUCE SCHUMAN

**SECRETARY**

**03/06/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date