

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000074496

**Entity Name:** IDEAL CITADELS LLC

**Current Principal Place of Business:**

16 WINDWARD DR.  
LAKE PLACID, FL 33852

**Current Mailing Address:**

16 WINDWARD DR.  
LAKE PLACID, FL 33852 US

**FEI Number:** 20-3307334

**Certificate of Status Desired:** No

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

HINCKLE, GARTH DJR  
16 WINDWARD DR.  
LAKE PLACID, FL 33852 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 MGRM  
Name HINCKLE, GARTH DJR.  
Address 16 WINDWARD DR.  
City-State-Zip: LAKE PLACID FL 33852

Title MGR  
Name DEVORE, ROGER L  
Address 5753 HWY 85 NORTH #6156  
City-State-Zip: CRESTVIEW FL 32536

Title AUTHORIZED REPRESENTATIVE  
Name GERSLEY, PATRICK K  
Address 5753 HWY 85 NORTH #6156  
City-State-Zip: CRESTVIEW FL 32536

*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:** ROGER L DEVORE

MGMR

03/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date