

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000042861

**Entity Name:** SOUTHPORT G.P., LLC

**Current Principal Place of Business:**

16550 NW 144TH AVE  
OKEECHOBEE, FL 34972

**Current Mailing Address:**

P.O. BOX 422312  
KISSIMMEE, FL 34741-2312 US

**FEI Number:** 20-8892429

**Certificate of Status Desired:** No

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

LEE, GARY L  
16550 NW 144TH AVE  
OKEECHOBEE, FL 34972 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 LEE, GARY L  
Address P.O. BOX 422312  
City-State-Zip: KISSIMMEE FL 34741-2312

*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:** GARY LEE

**REGISTERED AGENT**

**03/01/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date