## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094417

Entity Name: ODIS WILLIAMS, LLC

**Current Principal Place of Business:** 

900 PLYMOUTH SORRENTO RD. UNIT 11

PLYMOUTH, FL 32768

**Current Mailing Address:** 

PO BOX 11

PLYMOUTH. FL 32768 US

FEI Number: 26-1075974 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, ODIS E 900 PLYMOUTH SORRENTO RD UNIT 11 APOPKA, FL 32768 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

FILED Mar 03, 2025

**Secretary of State** 

1324407122CC

Authorized Person(s) Detail:

Title PRESIDENT

Name WILLIAMS, ODIS E

Address PO BOX 11

City-State-Zip: PLYMOUTH FL 32768

SIGNATURE: ODIS WILLIAMS

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.

**OWNER**