

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000101982

**Entity Name:** CASSELLS & ASSOCIATES, CPA, LLC

**Current Principal Place of Business:**

3600 RED ROAD  
407  
MIRAMAR, FL 33025

**Current Mailing Address:**

PO BOX 820297  
PEMBROKE PINES, FL 33082

**FEI Number:** 26-1343222

**Certificate of Status Desired:** No

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

CASSELLS-WILSON, ANNETTE  
3600 RED ROAD  
407  
MIRAMAR, FL 33025 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:** ANNETTE CASSELLS-WILSON

01/30/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CASSELLS-WILSON, ANNETTE  
Address 3600 RED ROAD  
407  
City-State-Zip: MIRAMAR FL 33025

Title AUTHORIZED MEMBER  
Name WILSON, RICKY  
Address 3600 RED ROAD  
407  
City-State-Zip: MIRAMAR FL 33025

*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:** ANNETTE CASSELLS-WILSON

MGR

01/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date