

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000037680

**Entity Name:** ABSOLUTE TANK CLEANING, LLC

**Current Principal Place of Business:**

479 BAYVIEW DRIVE NE  
ST. PETERSBURG, FL 33704

**Current Mailing Address:**

479 BAYVIEW DRIVE NE  
ST. PETERSBURG, FL 33704

**FEI Number:** 26-2513846

**Certificate of Status Desired:** No

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

CARRIER, LUTHER E  
479 BAYVIEW DRIVE NE  
ST. PETERSBURG, FL 33704 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 CARRIER, JUDY L  
Address 479 BAYVIEW DRIVE NE  
City-State-Zip: ST. PETERSBURG FL 33704

Title MGRM  
Name CARRIER, LUTHER E  
Address 479 BAYVIEW DRIVE NE  
City-State-Zip: ST. PETERSBURG FL 33704

Title MEMBER  
Name LANE, SONNY T  
Address 2641 35TH AVE N  
City-State-Zip: ST PETERSBURG FL 33713

Title MEMBER  
Name WALLACE, KATIE R  
Address 350 4TH ST S  
APT 4  
City-State-Zip: ST PETERSBURG FL 33701

*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:** KATIE WALLACE

**MEMBER**

**02/29/2024**

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

\_\_\_\_\_  
Date