

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000063961

**Entity Name:** TAYLOR FAMILY LLC

**Current Principal Place of Business:**

2873 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

13123 E. EMERALD COAST PKWY  
SUITE E  
INLET BEACH, FL 32461 US

**FEI Number:** 27-3777719

**Certificate of Status Desired:** No

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

ELLIOTT, TIMOTHY B  
2873 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 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 TAYLOR, DEBRA J  
Address 13123 E. EMERALD COAST PKWY  
SUITE E  
City-State-Zip: INLET BEACH FL 32461

Title MGRM  
Name SHEFFIELD, CHRISTINA N  
Address 13123 E. EMERALD COAST PKWY  
SUITE E  
City-State-Zip: INLET BEACH FL 32461

Title MGRM  
Name TAYLOR, LARRY G  
Address 13123 E. EMERALD COAST PKWY  
SUITE E  
City-State-Zip: INLET BEACH FL 32461

*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:** CHRISTINA N SHEFFIELD

**CO-OWNER/MANAGING  
MEMBER**

**04/25/2025**

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

\_\_\_\_\_  
Date