

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000091866

**Entity Name:** ROBSON MANAGEMENT LLC

**Current Principal Place of Business:**

292 S. BEACH ROAD  
HOBE SOUND, FL 33455

**Current Mailing Address:**

PO BOX 3580  
BROKEN ARROW, OK 74013 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

JOSEPH C. KEMPE PROFESSIONAL ASSOCIATION  
941 N HWY A1A  
JUPITER, FL 33477 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:** JOSEPH C. KEMPE

01/28/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            MANAGER  
Name            BURCHETT, CYNTHIA G MGR  
Address        PO BOX 3580  
City-State-Zip: BROKEN ARROW OK 74013

Title            MANAGER  
Name            BURCHETT, DALTON L  
Address        201 MORGAN BELL CIRCLE  
City-State-Zip: PRYOR OK 74361

*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:** CYNTHIA BURCHETT

MANAGER

01/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date