

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000000161

**Entity Name:** SPECIALTY PRODUCTS & CONSULTING, LLC

**Current Principal Place of Business:**

5010 SW 36TH LANE  
OCALA, FL 34474

**Current Mailing Address:**

5010 SW 36TH LANE  
OCALA, FL 34474 US

**FEI Number:** 58-2504506

**Certificate of Status Desired:** No

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

SMITH, JODENE E  
5010 SW 36TH LANE  
OCALA, FL 34474 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:** JODENE E SMITH

03/31/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	AUTHORIZED REPRESENTATIVE
Name	SMITH, WILLIAM J	Name	SMITH, JODENE E
Address	5010 SW 36TH LANE	Address	5010 SW 36TH LANE
City-State-Zip:	OCALA FL 34474	City-State-Zip:	OCALA FL 34474

*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:** WILLIAM J SMITH

MGRM

03/31/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date