

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000112254

Entity Name: NOVAPHOS DEVELOPMENT LLC**Current Principal Place of Business:**3200 COUNTY ROAD 630 W
FORT MEADE, FL 33841**Current Mailing Address:**3200 COUNTY ROAD 630 W
FORT MEADE, FL 33841**FEI Number:** 27-3709230**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VIGNOVIC, MARK
3200 COUNTY ROAD 630 W
FORT MEADE, FL 33841 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:** MARK VIGNOVIC

02/08/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title DIRECTOR
Name FAROUK CHAOUNI
Address 3200 COUNTY ROAD 630 W
City-State-Zip: FORT MEADE FL 33841

Title DIRECTOR
Name FOWLER, THEODORE P
Address 3200 COUNTY ROAD 630 W
City-State-Zip: FORT MEADE FL 33841

Title DIRECTOR
Name PEDRO RIBIERO SANTOS
Address 3200 COUNTY ROAD 630 W
City-State-Zip: FORT MEADE FL 33841

Title DIRECTOR
Name RON CAMBRE
Address 3200 COUNTY ROAD 630 W
City-State-Zip: FORT MEADE FL 33841

Title VP
Name VIGNOVIC, MARK
Address 3200 COUNTY ROAD 630 W
City-State-Zip: FORT MEADE FL 33841

Title DIRECTOR
Name COLE, SAMUEL
Address 3200 COUNTY ROAD 630 W
City-State-Zip: FORT MEADE FL 33841

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: RAIN DONG**ACCOUNTANT**

02/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date