

**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