

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000043140

**Entity Name:** PETER OLIVERS, LLC

**Current Principal Place of Business:**

4300 SUMMER BREEZE TERRACE  
VERO BEACH, FL 32967

**Current Mailing Address:**

4300 SUMMER BREEZE TERRACE  
VERO BEACH, FL 32967 US

**FEI Number:** 45-1829231

**Certificate of Status Desired:** No

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

GIVEN, KEVIN JAMES  
4300 SUMMER BREEZE TERRACE  
VERO BEACH, FL 32967 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:** KEVIN J GIVEN

03/02/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name GIVEN, KEVIN  
Address 2345 HIGHWAY A1A  
City-State-Zip: VERO BEACH FL 32963

*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:** KEVIN J GIVEN

MANAGING MEMBER

03/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date