

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000116564

**Entity Name:** RE SQUARED DEVELOPMENT, LLC

**Current Principal Place of Business:**

1900 DR M.L.K. JR ST N  
SAINT PETERSBURG, FL 33704

**Current Mailing Address:**

1900 DR M.L.K. JR ST N  
SAINT PETERSBURG, FL 33704 US

**FEI Number:** 45-4580639

**Certificate of Status Desired:** No

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

MULLERSMAN, ANTHONY P  
1900 DR M.L.K. JR ST N  
SAINT PETERSBURG, FL 33704 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MULLERSMAN, ANTHONY P  
Address 1200 5TH ST. S  
City-State-Zip: SAINT PETERSBURG FL 33701

*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:** ANTHONY MULLERSMAN

**AGENT**

**02/10/2025**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date