

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000117649

**Entity Name:** SAINT AMBROSE APIARIES, LLC

**Current Principal Place of Business:**

8360 THOMAS RD  
LAUREL HILL, FL 32567

**Current Mailing Address:**

8360 THOMAS RD  
LAUREL HILL, FL 32567 US

**FEI Number:** 45-3595393

**Certificate of Status Desired:** No

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

VAN HORN, THOMAS  
8360 THOMAS RD  
LAUREL HILL, FL 32503 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:** THOMAS VAN HORN

02/03/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	CEO	Title	COO
Name	VAN HORN, EMILY B	Name	VAN HORN, THOMAS D
Address	8360 THOMAS RD	Address	8360 THOMAS RD
City-State-Zip:	LAUREL HILL FL 32567	City-State-Zip:	LAUREL HILL FL 32567

*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:** THOMAS VAN HORN

OWNER

02/03/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date