## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000132289

Entity Name: 5007 LENOIR AVENUE, LLC

## **Current Principal Place of Business:**

5007 LENOIR AVENUE JACKSONVILLE, FL 32216

## **Current Mailing Address:**

PO BOX 50278 JACKSONVILLE BEACH. FL 32240 US

# FEI Number: APPLIED FOR

## Name and Address of Current Registered Agent:

LINDROS, GARY C 5007 LENOIR AVENUE JACKSONVILLE, FL 32216 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: GARY C LINDROS

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

SIGNATURE: GARY LINDROS

Title	MGRM
Name	LINDROS, GARY C
Address	PO BOX 50278
City-State-Zip:	JACKSONVILLE BEACH FL 32240

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.

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 11, 2024 Secretary of State 8224996582CC

Certificate of Status Desired: No

02/11/2024

Date

Date

## AGENT

02/11/2024