

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000138253

**Entity Name:** ELLEN FONTANA CPA, LLC

**Current Principal Place of Business:**

2451 N. MCMULLEN BOOTH RD., STE. 309  
CLEARWATER, FL 33759

**Current Mailing Address:**

2451 N. MCMULLEN BOOTH RD., STE. 309  
CLEARWATER, FL 33759 US

**FEI Number:** 45-3841539

**Certificate of Status Desired:** No

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

FONTANA, ELLEN  
2451 N. MCMULLEN BOOTH RD., STE. 309  
CLEARWATER, FL 33759 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 FONTANA, ELLEN CPA  
Address 2451 N. MCMULLEN BOOTH RD., STE.  
309  
City-State-Zip: CLEARWATER FL 33759

*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:** ELLEN FONTANA

MANAGING MEMBER

01/27/2023

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

\_\_\_\_\_ Date