

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000142062

**Entity Name:** LARGO PROPERTY MANAGEMENT, LLC**Current Principal Place of Business:**1120 S BELCHER ROAD  
SUITE 2  
LARGO, FL 33771**Current Mailing Address:**1120 S BELCHER ROAD  
SUITE 2  
LARGO, FL 33771 US**FEI Number:** 45-4127090**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BASKIN, HAMDEN H III  
14020 ROOSEVELT BLVD  
SUITE 808  
CLEARWATER, FL 33762 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	LEONHARDT, TRACIE J. D.O.
Address	1120 BELCHER RD S STE 2
City-State-Zip:	LARGO FL 33771

Title	AUTHORIZED REPRESENTATIVE
Name	BRUNSON, JANET
Address	1120 S BELCHER ROAD SUITE 2
City-State-Zip:	LARGO FL 33771

Title	AUTHORIZED MEMBER
Name	BEASLEY, MITCHEL L
Address	1120 BELCHER RD S SUITE 2
City-State-Zip:	LARGO FL 33771

Title	AUTHORIZED REPRESENTATIVE
Name	SALAS, ANDREA C
Address	1120 S BELCHER ROAD SUITE 2
City-State-Zip:	LARGO FL 33771

*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: ANDREA SALAS****ASSISTANT DIRECTOR  
OF OPERATIONS****01/08/2021**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date