

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000111970

**Entity Name:** CROSS SURVEYING, LLC

**Current Principal Place of Business:**

5265 OFFICE PARK BOULEVARD  
SUITE 101  
BRADENTON, FL 34203

**Current Mailing Address:**

P. O. BOX 21203  
BRADENTON, FL 34204 US

**FEI Number:** 46-0976989

**Certificate of Status Desired:** No

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

WALKER, ADRON H  
3119 MANATEE AVENUE WEST  
BRADENTON, FL 34205 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 MGR  
Name CROSS, ROBERT D  
Address 5265 OFFICE PARK BOULEVARD  
SUITE 101  
City-State-Zip: BRADENTON FL 34203

Title MGRM  
Name STROOP, GERALD DARTE JR  
Address 5265 OFFICE PARK BOULEVARD  
SUITE 101  
City-State-Zip: BRADENTON FL 34203

Title MANAGER  
Name CROSS, KYLE  
Address 5265 OFFICE PARK BOULEVARD  
SUITE 101  
City-State-Zip: BRADENTON FL 34203

Title AUTHORIZED MEMBER  
Name CROSS, DALTON  
Address 5265 OFFICE PARK BOULEVARD  
SUITE 101  
City-State-Zip: BRADENTON FL 34203

*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: ROBERT CROSS**

**MANAGER**

**04/27/2022**

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

\_\_\_\_\_  
Date