

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000158217

**Entity Name:** GINGERICH ENTERPRISES UNLIMITED, LLC

**Current Principal Place of Business:**

3107 E STATE RD 44  
WILDWOOD, FL 34785

**Current Mailing Address:**

3107 E STATE RD 44  
WILDWOOD, FL 34785 US

**FEI Number:** 46-1609411

**Certificate of Status Desired:** No

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

GINGERICH, PHILIP  
3107 E STATE RD 44  
WILDWOOD, FL 34785 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 GINGERICH, PHILIP  
Address 3107 E STATE RD 44  
City-State-Zip: WILDWOOD FL 34785

Title MGRM  
Name GINGERICH, RONDA  
Address 3107 E STATE RD 44  
City-State-Zip: WILDWOOD FL 34785

Title AMBR  
Name GINGERICH, AUSTIN  
Address 3107 E STATE RD 44  
City-State-Zip: WILDWOOD FL 34785

Title AMBR  
Name BETANCOURT, TIFFANY  
Address 3107 E STATE RD 44  
City-State-Zip: WILDWOOD FL 34785

*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:** AUSTIN GINGERICH

VP

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date