

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000107080

**Entity Name:** SUNSIDE CATERING & VENDING LLC

**Current Principal Place of Business:**

20 SUNSHINE PLACE  
FREEPORT, FL 32439

**Current Mailing Address:**

20 SUNSHINE PLACE  
FREEPORT, FL 32439

**FEI Number:** 27-1834235

**Certificate of Status Desired:** No

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

FORD, THOMAS P  
20 SUNSHINE PLACE  
FREEPORT, FL 32439 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 FORD, THOMAS P  
Address 20 SUNSHINE PLACE  
City-State-Zip: FREEPORT FL 32439

*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:** THOMAS FORD

**OWNER**

**04/13/2023**

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

\_\_\_\_\_  
Date