

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000120679

**Entity Name:** ON TRACK LAWN CARE LLC

**Current Principal Place of Business:**

3609 CONWICK DR  
SOUTHPORT, FL 32409

**Current Mailing Address:**

3609 CONWICK DR  
SOUTHPORT, FL 32409 US

**FEI Number:** 84-3651947

**Certificate of Status Desired:** No

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

WEBB, TIMMY  
3609 CONWICK DR  
SOUTHPORT, FL 32409 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	Title	MANAGER
Name	WEBB, MATTHEW D	Name	WEBB, LEANNA DEE
Address	1506 MAINE AVE	Address	3609 CONWICK DR
City-State-Zip:	LYNN HAVEN FL 32444	City-State-Zip:	SOUTHPORT FL 32409

*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:** LEANNA WEBB

MGR

03/10/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date