

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000075606

Entity Name: LBWU, LLC**Current Principal Place of Business:**12493 GAMBLE RD.
MONTICELLO, FL 32344**Current Mailing Address:**P.O. BOX 417
WACISSA, FL 32361 UN**FEI Number:** 46-5619258**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARSWELL, BETTE L
739 BETH PAGE ROAD
MONTICELLO, FL 32344 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:** CARSWELL, BETTE L

01/19/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	ASST. TREASURER
Name	CARSWELL, BETTE L	Name	BOLAND, BETTE
Address	739 BETH PAGE ROAD	Address	P.O. BOX 417
City-State-Zip:	MONTICELLO FL 32344	City-State-Zip:	WACISSA FL 32361

Title	AUTHORIZED REPRESENTATIVE
Name	RHYMES, JOHN
Address	P.O. BOX 417
City-State-Zip:	WACISSA FL 32361

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: BETTE CARSWELL

MGR

01/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date