

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000131839

**Entity Name:** ANTONELLI AUTOMOTIVE LLC

**Current Principal Place of Business:**

59 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953

**Current Mailing Address:**

59 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953 US

**FEI Number:** 47-1669333

**Certificate of Status Desired:** No

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

ANTONELLI ACCOUNTING INC  
59 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953 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 ANTONELLI, PETE A  
Address 5766 ABELMAN ROAD  
City-State-Zip: NORTH PORT FL 34291

Title MANAGER  
Name ANTONELLI, AMANDA  
Address 5766 ABELMAN ROAD  
City-State-Zip: NORTH PORT FL 34291

Title MANAGER  
Name ANTONELLI, MICHAEL  
Address 5766 ABELMAN ROAD  
City-State-Zip: NORTH PORT FL 34291

*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:** PETE ANTONELLI

MANAGER

04/08/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date