

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000151373

**Entity Name:** CASA SANTO STEFANO, LLC

**Current Principal Place of Business:**

2025 E 7TH AVE.  
TAMPA, FL 33605

**Current Mailing Address:**

2025 E 7TH AVE.  
TAMPA, FL 33605 US

**FEI Number:** 47-2162956

**Certificate of Status Desired:** No

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

SHANNON, JEFFREY C  
2025 E 7TH AVE  
TAMPA, FL 33605 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:** JEFFREY C. SHANNON

03/21/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            GONZMART, RICHARD  
Address        2025 E 7TH AVE.  
City-State-Zip: TAMPA FL 33605

Title            CHAIRMAN  
Name            GONZMART, CASEY  
Address        2025 E 7TH AVE  
City-State-Zip: TAMPA FL 33605

Title            ASST. SECRETARY  
Name            SHANNON, JEFFREY  
Address        2025 E 7TH AVE.  
City-State-Zip: TAMPA FL 33605

Title            ASST. TREASURER  
Name            FEDOROVICH, DENNIS  
Address        2025 E 7TH AVE.  
City-State-Zip: TAMPA FL 33605

Title            ASST. TREASURER  
Name            FARNELL, KRISTIE  
Address        2025 E 7TH AVE.  
City-State-Zip: TAMPA FL 33605

*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:** JEFFREY SHANNON

**ASSISTANCE  
SECRETARY**

03/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date