

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000176396

**Entity Name:** LEECAR, LLC

**Current Principal Place of Business:**

4485 SWILCAN BRIDGE LN NORTH  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

4485 SWILCAN BRIDGE LN NORTH  
JACKSONVILLE, FL 32224 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HOLBROOK COLD, KATHLEEN  
ONE INDEPENDENT DR  
STE 2301  
JACKSONVILLE, FL 32202 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	MGR
Name	ALBAN, DAVID W	Name	ALBAN, BREE R
Address	4485 SWILCAN BRIDGE LN NORTH	Address	4485 SWILCAN BRIDGE LN NORTH
City-State-Zip:	JACKSONVILLE FL 32224	City-State-Zip:	JACKSONVILLE FL 32224

*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:** DAVID ALBAN

**PRESIDENT**

**02/02/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date