

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000191541

**Entity Name:** WALLACE WEST, LLC

**Current Principal Place of Business:**

6585 SHADY HOLLOW DR  
PACE, FL 32571

**Current Mailing Address:**

5568 WOODBINE RD #730  
PACE, FL 32571 US

**FEI Number:** 47-2556806

**Certificate of Status Desired:** No

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

DOWNEY, HARRELL G  
6585 SHADY HOLLOW DR  
PACE, FL 32571 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           | AMBR                 |
| Name            | DOWNEY, HARRELL G    | Name            | DOWNEY, HARRELL G    |
| Address         | 6585 SHADY HOLLOW DR | Address         | 6585 SHADY HOLLOW DR |
| City-State-Zip: | PACE FL 32571        | City-State-Zip: | PACE FL 32571        |

*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:** HARRELL DOWNEY

**OWNER/MGR**

**03/06/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date