

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000097303

**Entity Name:** ALLISON BROWN, CPA LLC

**Current Principal Place of Business:**

1555 WILLIAMSBURG SQUARE  
LAKELAND, FL 33803-4277

**Current Mailing Address:**

1555 WILLIAMSBURG SQUARE  
LAKELAND, FL 33803-4277 US

**FEI Number:** 81-2661222

**Certificate of Status Desired:** No

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

BROWN, ALLISON  
1555 WILLIAMSBURG SQUARE  
LAKELAND, FL 33803 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            AUTHORIZED MEMBER  
Name            BROWN, ALLISON  
Address        1555 WILLIAMSBURG SQUARE  
City-State-Zip: LAKELAND FL 33803-4277

*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:** ALLISON BROWN

AMBR

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date