## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000145346

Entity Name: M.O.B. FAMILY, LLC

**Current Principal Place of Business:** 

4920 NEW PROVIDENCE AVE

TAMPA, FL 33629

**Current Mailing Address:** 

4920 NEW PROVIDENCE AVE TAMPA, FL 33629 US

FEI Number: 82-0733006 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS, MICHELE 4920 NEW PROVIDENCE AVE TAMPA, FL 33629 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

**FILED** Feb 01, 2024

**Secretary of State** 

4553550487CC

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

ROSS, MICHELE L Name SCHROPP, PATTI K Name 4920 NEW PROVIDENCE AVE Address 417 LANDOVER DR. Address City-State-Zip: TAMPA FL 33629 City-State-Zip: DECATUR GA 30030

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: MICHELE L ROSS MANAGING MEMBER