

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000233767

**Entity Name:** GREG TOSI, LLC

**Current Principal Place of Business:**

9842 50TH STREET CIR E  
PARRISH, FL 34219

**Current Mailing Address:**

9842 50TH STREET CIR E  
PARRISH, FL 34219 US

**FEI Number: 81-4828015**

**Certificate of Status Desired:** No

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

TOSI, GREG  
9842 50TH STREET CIR E  
PARRISH, FL 34219 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	PRESIDENT	Title	VP
Name	TOSI, GREG	Name	TOSI, KRISTEN
Address	9842 50TH STREET CIR E	Address	9842 50TH STREET CIR E
City-State-Zip:	PARRISH FL 34219	City-State-Zip:	PARRISH FL 34219

*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:** GREG TOSI

**PRESIDENT**

**03/31/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date