

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000040327

**Entity Name:** SUBA MANAGEMENT LLC

**Current Principal Place of Business:**

2226 HARRIS AVE  
UNIT 2  
KEY WEST, FL 33040

**Current Mailing Address:**

P.O. BOX 29  
KEY WEST, FL 33041

**FEI Number:** 82-0597196

**Certificate of Status Desired:** No

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

THOMAS, DAVID J III  
125 BUTLER STREET  
WEST PALM BEACH, FL 33407 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            AMBR  
Name            BANKS, SUZANNE D  
Address        P.O. BOX 29  
City-State-Zip: KEY WEST FL 33041

*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:** SUZANNE D BANKS

AMBR

02/10/2025

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

\_\_\_\_\_  
Date