

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000059815

**Entity Name:** WEST ARMORY LLC

**Current Principal Place of Business:**

15029 US HWY 301  
DADE CITY, FL 33523

**Current Mailing Address:**

PO BOX 1015  
DADE CITY, FL 33526

**FEI Number:** 82-0811239

**Certificate of Status Desired:** No

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

ALBRITTON MANAGEMENT SERVICES LLC  
36315 STATE ROAD 52  
DADE CITY, FL 33525 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:** JAMES ALBRITTON

04/25/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AUTHORIZED REPRESENTATIVE
Name	ALBRITTON MANAGEMENT SERVICES LLC	Name	WEST, KEVIN
Address	PO BOX 1015	Address	15029 US HWY 301
City-State-Zip:	DADE CITY FL 33526	City-State-Zip:	DADE CITY FL 33523

*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:** JAMES ALBRITTON

MANAGER

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date