

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000106128

**Entity Name:** ANTHONY J ZANDERS INSURANCE LLC

**Current Principal Place of Business:**

18311 HIGHWOODS PRESERVE PKWY  
3212  
TAMPA, FL 33647

**Current Mailing Address:**

18311 HIGHWOODS PRESERVE PKWY  
3212  
TAMPA, FL 33647 US

**FEI Number:** 82-1260151

**Certificate of Status Desired:** No

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

ZANDERS, ANTHONY J  
18311 HIGHWOODS PRESERVE PKWY  
APT 3212  
TAMPA, FL 33647 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:** ANTHONY J ZANDERS

02/24/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ZANDERS, ANTHONY J  
Address 18311 HIGHWOODS PRESERVE  
PKWY  
3212  
City-State-Zip: TAMPA FL 33647

*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:** ANTHONY JEROME ZANDERS

OWNER

02/24/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date