

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000111387

**Entity Name:** 517 9TH STREET NORTH, LLC

**Current Principal Place of Business:**

615 9TH ST. N.  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

615 9TH ST. N.  
ST. PETERSBURG, FL 33701 US

**FEI Number:** 82-1630173

**Certificate of Status Desired:** No

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

BUTLER, TIMOTHY E  
615 9TH ST. N.  
ST. PETERSBURG, FL 33701 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 MGR  
Name BUTLER, TIMOTHY  
Address 615 9TH ST N  
City-State-Zip: ST PETERSBURG FL 33701

Title MGR  
Name BARKETT, JOHN  
Address 615 9TH ST N  
City-State-Zip: ST PETERSBURG FL 33701

*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:** TIMOTHY BUTLER

**MGR**

**04/29/2025**

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

\_\_\_\_\_  
Date