

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000004899

Entity Name: GATOR BLINDS FLORIDA LLC

Current Principal Place of Business:

430 ANCHOR RD.
SUITE B
CASSELBERRY, FL 32707

Current Mailing Address:

430 ANCHOR RD.
SUITE B
CASSELBERRY, FL 32707

FEI Number: 37-1881051

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLDMANN, PETER
430 ANCHOR RD.
CASSELBERRY, FL 32707 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 GATOR BLINDS LLC
Address 430 ANCHOR RD.
City-State-Zip: CASSELBERRY FL 32707

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: PETER GOLDMANN

REGISTERED AGENT

04/27/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date