

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000098317

**Entity Name:** FITEYES LLC

**Current Principal Place of Business:**

10752 DEERWOOD PARK BLVD., SUITE 100  
JACKSONVILLE, FL 32256-4849

**Current Mailing Address:**

3545 ST JOHN'S BLUFF RD  
SUITE#1-337  
JACKSONVILLE, FL 32224 US

**FEI Number:** 82-5277855

**Certificate of Status Desired:** No

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

BAQUERO, ANANDA L  
9119 MERRILL ROAD  
BLDG 63  
JACKSONVILLE, FL 32225 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 SHIELDS, WILLIAM D  
Address 10752 DEERWOOD PARK BLVD.,  
SUITE 100  
City-State-Zip: JACKSONVILLE FL 32256-4849

Title AMBR  
Name BAQUERO, ANANDA L  
Address 3545 ST JOHN'S BLUFF RD  
SUITE#1-337  
City-State-Zip: JACKSONVILLE FL 32224

*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:** WILLIAM D SHIELDS

AMBR

04/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date