

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000107791

**Entity Name:** CAROLYN CASSIDY LLC

**Current Principal Place of Business:**

7 HUDSON AVENUE  
OCEAN RIDGE, FL 33435

**Current Mailing Address:**

7 HUDSON AVENUE  
OCEAN RIDGE, FL 33435 US

**FEI Number:** 83-4304187

**Certificate of Status Desired:** No

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

CASSIDY, TIMOTHY  
7 HUDSON AVENUE  
OCEAN RIDGE, FL 33435 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 CASSIDY, CAROLYN  
Address 7 HUDSON AVENUE  
City-State-Zip: OCEAN RIDGE FL 33435

*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:** CAROLYN H CASSIDY

**MANAGING MEMBER**

**01/27/2024**

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

\_\_\_\_\_  
Date