

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000162769

**Entity Name:** NEILL GRIFFIN MARQUIS OSKING, PLLC

**Current Principal Place of Business:**

311 S. SECOND ST  
STE. 200  
FORT PIERCE, FL 34950

**Current Mailing Address:**

P.O. BOX 1270  
FORT PIERCE, FL 34950 US

**FEI Number:** 83-1163599

**Certificate of Status Desired:** No

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

NEILL, RICHARD V JR.  
311 S. SECOND ST  
STE. 200  
FORT PIERCE, FL 34950 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 NEILL, RICHARD V  
Address 311 S. SECOND ST., STE. 200  
City-State-Zip: FORT PIERCE FL 34950

Title MGR  
Name NEILL, RICHARD V JR.  
Address 311 S. SECOND ST., STE. 200  
City-State-Zip: FORT PIERCE FL 34950

Title MGR  
Name MARQUIS-ABRAMS, RENEE  
Address 311 S. SECOND ST., STE. 200  
City-State-Zip: FORT PIERCE FL 34950

Title MGR  
Name OSKING, IAN E.  
Address 311 S 2ND STREET, SUITE 200  
City-State-Zip: FORT PIERCE FL 34950

*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:** RICHARD V. NEILL, JR.

**MGR**

**03/16/2023**

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

\_\_\_\_\_  
Date