

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000178853

**Entity Name:** PAULA DEE PHILPOT, LLC

**Current Principal Place of Business:**

16181 90TH ST N.  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

16181 90TH ST N.  
LOXAHATCHEE, FL 33470

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

PHILPOT, PAULA D  
16181 90TH ST N.  
LOXAHATCHEE, FL 33470 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 PHILPOT, PAULA D  
Address 16181 90TH ST N.  
City-State-Zip: LOXAHATCHEE FL 33470

*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:** PAULA D PHILPOT

MGR

04/29/2022

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

\_\_\_\_\_  
Date