

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000041412

**Entity Name:** MANGER PROPRE LLC

**Current Principal Place of Business:**

2572 NW EVENTIDE PLACE  
STUART, FL 34994

**Current Mailing Address:**

2572 NW EVENTIDE PLACE  
STUART, FL 34994 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FASANO, CATHERINE  
2572 NW EVENTIDE PLACE  
STUART, FL 34994 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 SULLIVAN, DOMINIQUE  
Address 2572 NW EVENTIDE PLACE  
City-State-Zip: STUART FL 34994

Title AMBR  
Name SULLIVAN, BRENDAN  
Address 2572 NW EVENTIDE PLACE  
City-State-Zip: STUART FL 34994

*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:** DOMINIQUE TERKA SULLIVAN

01/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date