

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000150479

**Entity Name:** DEBORAH KELLY TAX SERVICES, LLC

**Current Principal Place of Business:**

472 COUNTRY MEADOWS BLVD  
PLANT CITY, FL 33565

**Current Mailing Address:**

472 COUNTRY MEADOWS BLVD  
PLANT CITY, FL 33565

**FEI Number: 84-2000944**

**Certificate of Status Desired: No**

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

KELLY, DEBORAH B  
472 COUNTRY MEADOWS BLVD  
PLANT CITY, FL 33565 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            PRES  
Name            KELLY, DEBORAH B  
Address        472 COUNTRY MEADOWS BLVD  
City-State-Zip: PLANT CITY FL 33565

*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: KELLY, DEBORAH B**

**MANAGER**

**01/31/2023**

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

\_\_\_\_\_ Date