## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000214296

Entity Name: HAILSURE, LLC

**Current Principal Place of Business:** 

4523 BROOK DRIVE

WEST PALM BEACH. FL 33417

**Current Mailing Address:** 

PO BOX 3198

BLUFFTON, SC 29910 US

FEI Number: 84-2918863 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DUER, RICHARD A 4520 BROOK DRIVE WEST PALM BEACH, FL 33417 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: RICHARD DUER 02/15/2025

Electronic Signature of Registered Agent

Date

FILED Feb 15, 2025

**Secretary of State** 

5722722487CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

NameDUER, RICHARD ANameROSE, BRIAN DAddress4520 BROOK DRIVEAddressP.O. BOX 3198

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: BLUFFTON SC 29910

Title AMBR

Name GROFF, KENNETH R

Address P.O. BOX 3198

City-State-Zip: BLUFFTON SC 29910

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 DUER MEMBER 02/15/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date