

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000303601

**Entity Name:** 5 STAR BOOKKEEPING & TAX SERVICE LLC

**Current Principal Place of Business:**

26820 MONDON HILL RD  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

C/O WENDY O'BRIEN  
PO BOX 10907  
BROOKSVILLE, FL 34603 US

**FEI Number:** 84-3960443

**Certificate of Status Desired:** No

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

OBRIEN, WENDY  
26838 MONDON HILL RD  
BROOKSVILLE, FL 34601 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            OBRIEN, WENDY D  
Address        26838 MONDON HILL RD  
City-State-Zip: BROOKSVILLE FL 34601

*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:** WENDY D OBRIEN

AMBR

05/01/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date