

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000014049

**Entity Name:** TAMIAMI PRIVATE OFFICE, LLC

**Current Principal Place of Business:**

10970 SOUTH CLEVELAND AVE., SUITE #303  
FORT MYERS, FL 33907

**Current Mailing Address:**

PO BOX 61969  
FT MYERS, FL 33906 US

**FEI Number:** 84-4413546

**Certificate of Status Desired:** No

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

NOVATT, JEFF ESQ.  
1415 PANTHER LANE, SUITE 432  
NAPLES, FL 34109 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 BURKE, CINDY SUE  
Address 15100 MILAGROSA DR., #203  
City-State-Zip: FORT MYERS FL 33908

Title MGR  
Name FISHER, JOHN ARTHUR  
Address 1361 SERRANO CIRCLE  
City-State-Zip: NAPLES FL 34105

*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:** CINDY SUE BURKE

**MGR**

**04/07/2025**

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

\_\_\_\_\_  
Date