

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000063495

**Entity Name:** 5460 43RD TER N LLC

**Current Principal Place of Business:**

6282 39TH AVE N  
ST PETERSBURG, FL 33709

**Current Mailing Address:**

6282 39TH AVE N  
ST PETERSBURG, FL 33709 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GIL, ABDIEL  
6282 39TH AVE N  
ST PETERSBURG, FL 33709 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 MGRM  
Name GIL, ABDIEL  
Address 6282 39TH AVE N  
City-State-Zip: ST PETERSBURG FL 33709

Title MGRM  
Name GIL, BLAIR  
Address 6282 39TH AVE N  
City-State-Zip: ST PETERSBURG FL 33709

*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:** ABDIEL GIL

**PRESIDENT**

**02/07/2023**

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

\_\_\_\_\_  
Date