

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000197069

**Entity Name:** LENHART ENTERPRISES, LLC

**Current Principal Place of Business:**

1925 SW 18TH CT  
SUITE 107  
OCALA, FL 34471

**Current Mailing Address:**

1925 SW 18TH CT  
SUITE 107  
OCALA, FL 34471 US

**FEI Number:** 85-2038527

**Certificate of Status Desired:** No

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

LENHART, ROBYN D  
402 WOLDUNN CIRCLE  
LAKE MARY, FL 32746 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	Title	AMBR
Name	LENHART, ROBYN D	Name	LENHART, JEFFREY A
Address	402 WOLDUNN CIRCLE	Address	402 WOLDUNN CIRCLE
City-State-Zip:	LAKE MARY FL 32746	City-State-Zip:	LAKE MARY FL 32746

*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: ROBYN LENHART**

**OWNER**

**02/11/2025**

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

\_\_\_\_\_  
Date