

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000384866

**Entity Name:** FIGGERS SECURED TAX SERVICE LLC

**Current Principal Place of Business:**

610 E ZACK ST  
STE 110-2162  
TAMPA, FL 33602

**Current Mailing Address:**

11112 NORMANDY CIRCLE  
APT 4  
TEMPLE TERRACE , FL 33617 US

**FEI Number:** 85-3422589

**Certificate of Status Desired:** No

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

FIGGERS, TIMOTHY  
610 E ZACH ST  
STE 110-2162  
TAMPA, FL 33602 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 AR  
Name FIGGERS, TIMOTHY  
Address 610 E ZACK ST  
STE 110-2162  
City-State-Zip: TAMPA FL 33602

*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:** TIMOTHY FIGGERS

**OWNER**

**04/27/2023**

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

\_\_\_\_\_ Date