

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000392926

**Entity Name:** 4450 40TH AVE N #D2, LLC

**Current Principal Place of Business:**

4330 56TH ST. NORTH  
KENNETH CITY, FL 33709

**Current Mailing Address:**

P.O. BOX 7188  
ST. PETERSBURG, FL 33734 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

VEHORN, PAUL R  
4330 56TH ST. NORTH  
KENNETH CITY, 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            CEO  
Name            VEHORN, PAUL ROBERT  
Address        PO BOX 7188  
City-State-Zip: ST PETERSBURG FL 33734

*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:** DR. PAUL R. VEHORN

CEO

04/08/2024

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

\_\_\_\_\_ Date