

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000246603

**Entity Name:** CGR PROPS, LLC

**Current Principal Place of Business:**

2504 HARRIMAN CIRCLE  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

2504 HARRIMAN CIRCLE  
TALLAHASSEE, FL 32308 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ROSENBERG, CHARLES  
2504 HARRIMAN CIRCLE  
TALLAHASSEE, FL 32308 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 ROSENBERG, CHARLES  
Address 2037 CANEWOOD COURT  
City-State-Zip: TALLAHASSEE FL 32303

Title MGR  
Name ROSENBERG, CHARLES  
Address 3910 GAFFNEY LOOP  
City-State-Zip: TALLAHASSEE FL 32303

Title MGR  
Name ROSENBERG, CHARLES  
Address 3887 GAFFNEY LOOP  
City-State-Zip: TALLAHASSEE FL 32303

Title MGR  
Name ROSENBERG, CHARLES  
Address SAVANNAH FOREST S/D LOT 40  
City-State-Zip: CRAWFORDVILLE FL 32327

Title MGR  
Name ROSENBERG, GENEVIEVE C  
Address 2504 HARRIMAN CIRCLE  
City-State-Zip: TALLAHASSEE FL 32308

Title CGR PROPS LLC  
Name ROSENBERG, CHARLES  
Address 2504 HARRIMAN CIRCLE  
City-State-Zip: TALLAHASSEE FL 32308

*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:** CHARLES ROSENBERG

**MGR.**

**04/03/2024**

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

\_\_\_\_\_  
Date