

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000298036

**Entity Name:** ASAP HOME INSPECTIONS, LLC

**Current Principal Place of Business:**

7745 SW 187TH AVE  
DUNNELLON, FL 34432

**Current Mailing Address:**

7745 SW 187TH AVE  
DUNNELLON, FL 34432 US

**FEI Number:** 87-1847427

**Certificate of Status Desired:** No

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

CONNOR, SARAH A  
7745 SW 187TH AVE  
DUNNELLON, FL 34432 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            | CONNOR, SARAH      | Name            | CONNOR, PATRICK S  |
| Address         | 7745 SW 187TH AVE  | Address         | 7745 SW 187TH AVE  |
| City-State-Zip: | DUNNELLON FL 34432 | City-State-Zip: | DUNNELLON FL 34432 |

*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:** SARAH CONNOR

AMBR

04/13/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date