

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000359737

Entity Name: SWFL CPR LLC

Current Principal Place of Business:

4260 HORSE CREEK BLVD
FORT MYERS, FL 33905

Current Mailing Address:

4260 HORSE CREEK BLVD
FORT MYERS, FL 33905 UN

FEI Number: 87-2159452

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEAN, CURTIS M
4260 HORSE CREEK BLVD
FORT MYERS, FL 33905 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
Name DEAN, CURTIS M
Address 4260 HORSE CREEK BLVD
City-State-Zip: FORT MYERS FL 33905

Title AMBR
Name MOORE, CHAD S
Address 9143 CYPRESS DR. S
City-State-Zip: FORT MYERS FL 33967

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: CURTIS DEAN

OWNER

02/05/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date