

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000466257

**Entity Name:** DEBBIE BABY CARE, LLC

**Current Principal Place of Business:**

1271 SW PARMA AVE  
PORT SAINT LUCIE, FL 34953

**Current Mailing Address:**

1271 SW PARMA AVE  
PORT SAINT LUCIE, FL 34953 US

**FEI Number:** 87-3468714

**Certificate of Status Desired:** No

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

LETTMAN, JUDITH  
2525 SW SAVONA BLVD  
PORT ST. LUCIE, FL 34953 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:** JUDITH LETTMAN

03/07/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LETTMAN, DEBRECE  
Address 1271 SW PARMA AVE  
City-State-Zip: PORT SAINT LUCIE FL 34953

Title AUTHORIZED MEMBER  
Name HOLM, BRIANNA DEBRECE  
Address 1271 SW PARMA AVE  
City-State-Zip: PORT SAINT LUCIE FL 34953

*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:** DEBRECE LETTMAN

MANAGER

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date