

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000534184

**FILED**  
**Apr 24, 2024**  
**Secretary of State**  
**2904829644CC**

**Entity Name:** LOVES HOME MANAGEMENT LLC

**Current Principal Place of Business:**

2156 LOCHMOOR CIRCLE  
NORTH FORT MYERS, FL 33903

**Current Mailing Address:**

2156 LOCHMOOR CIRCLE  
NORTH FORT MYERS, FL 33903 US

**FEI Number:** 88-1837001

**Certificate of Status Desired:** No

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

LOVE, CINDY  
2156 LOCHMOOR CIRCLE  
NORTH FORT MYERS, FL 33903 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 LOVE, CINDY  
Address 2156 LOCHMOOR CIRCLE  
City-State-Zip: NORTH FORT MYERS FL 33903

Title PARTNER  
Name LOVE, THOMAS JAMES  
Address 2156 LOCHMOOR CIRCLE  
City-State-Zip: NORTH FORT MYERS FL 33903

Title PARTNER  
Name HILL, JAMES GLEASON  
Address 2156 LOCHMOOR CIRCLE  
City-State-Zip: NORTH FORT MYERS FL 33903

*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:** CINDY LOVE

**CO-OWNER**

**04/24/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date