## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000024901

Entity Name: RUDE SHRIMP FORT MYERS BEACH, LLC

**Current Principal Place of Business:** 

450 HARBOR COURT

UNIT 1

FORT MYERS BEACH, FL 33931

**Current Mailing Address:** 

**PO BOX 204** 

WATERLOO, NE 68069 US

FEI Number: 87-4623164 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAHNERS, LISA 450 HARBOR COURT UNIT 1 FORT MYERS BEACH, FL 33931 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: LISA LAHNERS 02/06/2025

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title AMBR Title AMBR

NameHOLZAPFEL, ANTON J.NameHARLOW, TRAVIS D.Address336 SHOREWOOD LNAddress2526 RIVER ROADCity-State-Zip:WATERLOO NE 68069City-State-Zip:WATERLOO NE 68069

Title AMBR Title AMBR

Name HARLOW, ASHLEY H. Name LAHNERS, LISA M.

Address 2526 RIVER ROAD Address 336 SHOREWOOD LANE
City-State-Zip: WATERLOO NE 68069 City-State-Zip: WATERLOO NE 68069

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: TRAVIS D HARLOW

**PARTNER** 

02/06/2025

FILED Feb 06, 2025

**Secretary of State** 

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