

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000052257

**Entity Name:** THRIVE, ELEVATE & IMPACT CHANGE LLC

**Current Principal Place of Business:**

2015 OAK VIEW LANE  
PALM HARBOR, FL 34683

**Current Mailing Address:**

2015 OAK VIEW LANE  
PALM HARBOR, FL 34683 US

**FEI Number:** 88-0647433

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
5575 S SEMORAN BLVD  
ORLANDO, FL 32822 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	MGR	Title	MGR
Name	BENNETT, TRACY L	Name	DERY, TODD M
Address	2015 OAK VIEW LANE	Address	4605 87TH STREET
City-State-Zip:	PALM HARBOR FL 34683	City-State-Zip:	SEBASTIAN FL 32958

*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:** BENNETT , TRACY L

**MGR**

**02/27/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date