

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000172697

**Entity Name:** ONE50TH, LLC**Current Principal Place of Business:**4575 W. HWY 40  
OCALA, FL 34482**Current Mailing Address:**4575 W HIGHWAY 40  
OCALA, FL 34482 US**FEI Number:** 92-1182096**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COOPER, MICHAEL J  
1900 N ATLANTIC AVE UNIT 1203  
DAYTONA BEACH, FL 32118 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  
Name DEL ZOTTO, LAURA  
Address 4575 W. HWY 40  
City-State-Zip: OCALA FL 34482

Title MGR  
Name DEL ZOTTO, MARY  
Address 4575 W. HWY 40  
City-State-Zip: OCALA FL 34482

Title MGR  
Name DEL ZOTTO, PHILIP  
Address 4575 W. HWY 40  
City-State-Zip: OCALA FL 34482

Title MGR  
Name DEL ZOTTO, MARIO  
Address 4575 W. HWY 40  
City-State-Zip: OCALA FL 34482

Title MGR  
Name DEL ZOTTO, ABIGAIL  
Address 4575 W. HWY 40  
City-State-Zip: OCALA FL 34482

Title MGR  
Name DEL ZOTTO, ELIZABETH  
Address 4575 W. HWY 40  
City-State-Zip: OCALA FL 34482

Title MGR  
Name DEL ZOTTO KLONART, MIELLA  
Address 4575 W. HWY 40  
City-State-Zip: OCALA FL 34482

*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: LAURA A DEL ZOTTO****MANAGER****02/23/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date