## **2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000207040

Entity Name: WERNER CLAIMS, LLC

**Current Principal Place of Business:** 

3944 KNOTT DR APOPKA, FL 32712

**Current Mailing Address:** 

3944 KNOTT DR

APOPKA, FL 32712 US

FEI Number: 88-2452387 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WERNER, EDWARD A 3944 KNOTT DR APOPKA, FL 32712 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

FILED Feb 08, 2024

**Secretary of State** 

4918257207CC

## Authorized Person(s) Detail:

Title MGR

Name WERNER, EDWARD A

Address 3944 KNOTT DR

City-State-Zip: APOPKA FL 32712

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.

**MGR** 

SIGNATURE: EDWARD WERNER