

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000285364

**Entity Name:** BOWEN'S BERRIES LLC

**Current Principal Place of Business:**

2100 SE HWY 42  
SUMMERFIELD, FL 34491

**Current Mailing Address:**

2100 SE HWY 42  
SUMMERFIELD, FL 34491

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ROBERT R. BRYANT, CPA, PLLC  
10941 SE US HWY 441  
BELLEVIEW, FL 34420 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            BOWEN, SHIRLEY E  
Address        2100 SE HWY 42  
City-State-Zip: SUMMERFIELD FL 34491

Title            AMBR  
Name            WOLF, DAVID  
Address        2100 SE HWY 42  
City-State-Zip: SUMMERFIELD FL 34491

*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:** BOWEN , SHIRLEY E

AMBR

04/23/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date