

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000379120

**Entity Name:** THE TONY HAND STORY LLC

**Current Principal Place of Business:**

7902 CITRUS BLOSSOM DR  
LAND O LAKES, FL 34637

**Current Mailing Address:**

7902 CITRUS BLOSSOM DR  
LAND O LAKES, FL 34637 US

**FEI Number:** 88-3992605

**Certificate of Status Desired:** No

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

SLATER, M GRANT  
7902 CITRUS BLOSSOM DR  
LAND O LAKES, FL 34637 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 SLATER, M GRANT  
Address 7902 CITRUS BLOSSOM DR  
City-State-Zip: LAND O LAKES FL 34637

*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:** M GRANT G SLATER

MGR

01/18/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date