

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000384384

**Entity Name:** GLADYS CASTELLON LLC

**Current Principal Place of Business:**

1120 CHAMPIONS RIDGE CIRCLE APT 108  
DAVENPORT, FL 33896

**Current Mailing Address:**

1120 CHAMPIONS RIDGE CIRCLE APT 108  
DAVENPORT, FL 33896 US

**FEI Number:** 92-0251299

**Certificate of Status Desired:** No

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

CASTELLON, GLADYS  
1120 CHAMPIONS RDGE CIR  
APT 108  
DAVENPORT, FL 33896 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            PRES  
Name            CASTELLON, GLADYS  
Address        1120 CHAMPIONS RDGE CIR  
                  APT 108  
City-State-Zip: DAVENPORT FL 33896

*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:** GLADYS CASTELLON

**PRESIDENT**

**04/17/2024**

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

\_\_\_\_\_  
Date