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. 02/06/2025 MANAGER

SIGNATURE: MARY ANNE WILTSE

Electronic Signature of Signing Authorized Person(s) Detail

Т Ν Δ City-State-Zip: TAMPA FL 33629

	Electronic Signature of Registered Agent		
Authorized	Person(s) Detail :		
Title	AMBR	Title	AMBR
Name	LYMAN, AARON	Name	WILTSE, MARY ANNE
Address	23023 LAKE SENECA ROAD	Address	1040 S. STERLING AVENUE
City-State-Zip:	EUSTIS FL 32736	City-State-Zip:	TAMPA FL 33629
Title	AMBR		
Name	WILTSE, STEVEN W		
Address	1040 S. STERLING AVENUE		

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.

1040 S. STERLING AVENUE TAMPA, FL 33629

FEI Number: 92-1069961

201 NORTH FRANKLIN STREET

SPENSERV, INC.

SIGNATURE:

TAMPA, FL 33602 US

SUITE 2150

Name and Address of Current Registered Agent:

Current Mailing Address:

1040 S. STERLING AVENUE

DOCUMENT# L22000415266

Entity Name: REFLECTION CUSTOM HOMES - GEORGIA, LLC

Current Principal Place of Business:

TAMPA, FL 33629

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Certificate of Status Desired: Yes

FILED Feb 06, 2025 Secretary of State 0188555614CC

Date

Date