## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000439091

Entity Name: BBBAD, LLC

**Current Principal Place of Business:** 

7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702

**Current Mailing Address:** 

7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702 US

FEI Number: 92-1997865 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702 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 06, 2024

**Secretary of State** 

2509932778CC

Authorized Person(s) Detail:

Title **MANAGER** Title

COTTRILL, DARREN Name Name OWENS, BARRY

7901 4TH ST N STE 300 Address 7901 4TH ST N STE 300 Address

ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip:

Title **MANAGER** Title **MANAGER** 

Name CULLEN, BRIAN LACOUTURE, ANDRE Name

Address 7901 4TH ST N STE 300 Address 7901 4TH ST N STE 300

ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip:

Title MANAGER

Name UFFELMAN, BRIAN Address 7901 4TH ST N STE 300

City-State-Zip: ST. PETERSBURG FL 33702

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: DARREN COTTRILL

MANAGER

**MANAGER** 

02/06/2024