

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000161120

Entity Name: PHOENIX BAYOU, L.L.C.

Current Principal Place of Business:

716 N 9TH AVE
PENSACOLA, FL 32501

Current Mailing Address:

716 N 9TH AVE
PENSACOLA, FL 32501 US

FEI Number: 92-3425223

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHULTZ, KERRY ANNE ESQ
2779 GULF BREEZE PKWY
GULF BREEZE, FL 32563 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 CARRO, MICHAEL A
Address 4369 DEVEREUX CIR
City-State-Zip: PENSACOLA FL 32504

Title MBR
Name CARRO REVOCABLE TRUST
Address 4369 DEVEREUX CIR
City-State-Zip: PENSACOLA FL 32504

Title MBR
Name CORDES, BOB
Address 7416 CAMALE DR
City-State-Zip: PENSACOLA FL 32504

Title MBR
Name SMITH, ROBERT J
Address 1704 OSCEOLA BLVD
City-State-Zip: PENSACOLA FL 32504

Title MBR
Name REDHEAD, DONALD
Address 1707 N SPRING ST
City-State-Zip: PENSACOLA FL 32501

Title MBR
Name CARRO, MILAN
Address 4369 DEVEREUX CIR
City-State-Zip: PENSACOLA FL 32504

Title MBR
Name CARRO, MICHAEL A
Address 4369 DEVEREUX CIR
City-State-Zip: PENSACOLA FL 32504

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: MICHAEL CARRO, CCIM

MANAGER

01/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date