

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000267225

**Entity Name:** ELEMENTS DISASTER RECOVERY CONSTRUCTION LLC

**Current Principal Place of Business:**

1540 MONUMENT RD #6  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

1540 MONUMENT RD #6  
JACKSONVILLE, FL 32225 US

**FEI Number:** 93-1892893

**Certificate of Status Desired:** No

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

ROBERTS, BRIAN A  
4771 YACHT COURT  
JACKSONVILLE, FL 32225 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 ROBERTS, BRIAN A  
Address 4771 YACHT COURT  
City-State-Zip: JACKSONVILLE FL 32225

Title MGR  
Name JONSSON, SVEN  
Address 8 STARFISH PLACE  
City-State-Zip: PONTE VEDRA FL 32082

*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:** BRIAN ROBERTS

**OWNER**

**03/20/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date