

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000267877

**Entity Name:** CLARA PRINGLE TRANSITIONAL HOME LLC

**Current Principal Place of Business:**

6223 WHITE CEDAR  
SEBRING, FL 33875

**Current Mailing Address:**

6223 WHITE CEDAR  
SEBRING, FL 33875

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

PRINGLE, CLARA  
6223 WHITE CEDAR RD  
SEBRING, FL 33875 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 AR  
Name FLETCHER, SHARON  
Address 3633 BETHUNE RD  
City-State-Zip: SEBRING FL 33870

Title AP  
Name PRINGLE, JULIOUS  
Address 6223 WHITE CEDAR RD  
City-State-Zip: SEBRING FL 33875

*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:** SHARON FLETCHER

AR

03/18/2024

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

\_\_\_\_\_ Date