

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000351591

**Entity Name:** THE CARTER FAMILY HOMESTEAD LLC

**Current Principal Place of Business:**

33350 CRIPPLE HORSE TRAIL  
CALLAHAN, FL 32011

**Current Mailing Address:**

33350 CRIPPLE HORSE TRAIL  
CALLAHAN, FL 32011 UN

**FEI Number:** 93-2593602

**Certificate of Status Desired:** No

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

CARTER, ADAM H  
33350 CRIPPLE HORSE TRAIL  
CALLAHAN, FL 32011 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 CARTER, ADAM H  
Address 33350 CRIPPLE HORSE TRAIL  
City-State-Zip: CALLAHAN FL 32011

*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:** ADAM CARTER

**MANAGER**

**02/18/2025**

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

\_\_\_\_\_  
Date