

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000047742

Entity Name: HILDA&SONNY PARTY RENTAL & EVENT LLC**Current Principal Place of Business:**333 LAKE DOE BLVD
APOPKA , FL 32703**Current Mailing Address:**333 LAKE DOE BLVD
APOPKA, FL 32703 US**FEI Number:** 99-0866680**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, KEVIN G
333 LAKE DOE BLVD
APOPKA, FL 32703 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	SULLIVAN, TRACY
Address	333 LAKE DOE BLVD
City-State-Zip:	APOPKA FL 32703

Title	MGR
Name	NEAL, WILLIE A JR
Address	1225 FALCONCREST BLVD
City-State-Zip:	APOPKA FL FL 32712

Title	MGR
Name	NEAL, WILLIAM A
Address	1225 FALCONCREST BLVD
City-State-Zip:	APOPKA FL FL 32712

Title	MGR
Name	NEAL, ANASTASIA
Address	1225 FALCONCREST BLVD
City-State-Zip:	APOPKA FL FL 32712

Title	MGR
Name	JOHNSON, KAMAYA
Address	1225 FALCONCREST BLVD
City-State-Zip:	APOPKA FL FL 32712

Title	MGR/OWNER
Name	JOHNSON, KEVIN
Address	1225 FALCONCREST BLVD
City-State-Zip:	APOPKA FL FL 32712

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: KEVIN JOHNSON

MGR

02/27/2025

Electronic Signature of Signing Authorized Person(s) Detail_____
Date