

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001287

Entity Name: MOISAND FITZGERALD TAMAYO LLC**Current Principal Place of Business:**300 S ORANGE AVE
SUITE 1170
ORLANDO, FL 32801**Current Mailing Address:**300 SOUTH ORANGE AVE, SUITE 1170
ORLANDO, FL 32801 US**FEI Number:** 59-3528844**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FITZGERALD, CHARLES E
300 S ORANGE AVE
SUITE 1170
ORLANDO, FL 32801 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	FITZGERALD, CHARLES E. III
Address	8348 AMBER OAK DRIVE
City-State-Zip:	ORLANDO FL 32817

Title	MGR
Name	TAMAYO, RONALD
Address	3998 ISABELLA CIR
City-State-Zip:	WINDERMERE FL 34786

Title	MGR
Name	MOISAND, DANIEL B
Address	569 PARKWOOD WAY
City-State-Zip:	MELBOURNE FL 32940

Title	AUTHORIZED MEMBER/MGR
Name	CHANDLER, DERRICK B
Address	2422 GEM MARY COURT
City-State-Zip:	ORLANDO FL 32806

Title	MGR
Name	SALMON, MICHAEL T.
Address	3533 FOXCHASE DR
City-State-Zip:	CLERMONT FL 34711

Title	MGR
Name	NASH, SARA
Address	194 LEWFIELD CIRCLE
City-State-Zip:	WINTER PARK FL 32792

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: SARA NASH - MOISAND FITZGERALD TAMAYO,
LLC

MANAGER

01/12/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date