

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000000428

**Entity Name:** SEMINOLE HOLDINGS GROUP LLC

**Current Principal Place of Business:**

455 NORTH INDIAN ROCKS ROAD  
SUITE B  
BELLEAIR BLUFFS, FL 33770

**Current Mailing Address:**

455 NORTH INDIAN ROCKS ROAD  
SUITE B  
BELLEAIR BLUFFS, FL 33770

**FEI Number:** 26-3911982

**Certificate of Status Desired:** No

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

FETTER, TIMOTHY S  
455 NORTH INDIAN ROCKS ROAD  
SUITE B  
BELLEAIR BLUFFS, FL 33770 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:** TIMOTHY FETTER

02/02/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER
Name	BANKS, ROBERT J
Address	516 LAKEVIEW ROAD, VILLA III
City-State-Zip:	CLEARWATER FL 33756
Title	MANAGER
Name	DIAZ, CHRIS G
Address	455 NORTH INDIAN ROCKS ROAD SUITE B
City-State-Zip:	BELLEAIR BLUFFS FL 33770

Title	MANAGER
Name	FETTER, TIMOTHY S
Address	455 NORTH INDIAN ROCKS ROAD SUITE B
City-State-Zip:	BELLEAIR BLUFFS FL 33770
Title	MANAGER
Name	RITTER, JOSEPH E
Address	455 NORTH INDIAN ROCKS ROAD SUITE B
City-State-Zip:	BELLEAIR BLUFFS FL 33770

*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:** TIMOTHY FETTER

MANAGER

02/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date