

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000016543

**Entity Name:** FSA ADVISORY GROUP, LLC

**Current Principal Place of Business:**

212 S ALCANIZ ST  
PENSACOLA, FL 32502

**Current Mailing Address:**

212 S ALCANIZ ST  
PENSACOLA, FL 32502 US

**FEI Number:** 87-1119387

**Certificate of Status Desired:** Yes

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

SWANN, KAREN  
212 S ALCANIZ ST  
PENSACOLA, FL 32502 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 MBR  
Name HOSMAN, JOHN  
Address 8571 FOXTAIL LOOP  
City-State-Zip: PENSACOLA FL 32526

Title MBR  
Name LOWREY, NANCY  
Address 776 WHIPPOORWILL LANE  
City-State-Zip: ATMORE AL 36502

Title AP  
Name SWANN, KAREN  
Address 212 S ALCANIZ ST  
City-State-Zip: PENSACOLA FL 32502

*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:** KAREN B SWANN

EXECUTIVE ASSISTANT

02/15/2022

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

\_\_\_\_\_  
Date