



DIVISION of
CORPORATIONS
an official State of Florida website

[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Limited Liability Company
CCF PROPERTIES LLC

Filing Information

Document Number L18000059869
FEI/EIN Number 85-5194697
Date Filed 03/07/2018
Effective Date 03/01/2018
State FL
Status ACTIVE

Principal Address

11169 CEDAR CREEK FARMS RD
GLEN ST MARY, FL 32040

Mailing Address

11169 CEDAR CREEK FARMS RD
GLEN ST MARY, FL 32040

Registered Agent Name & Address

STEWART, SAMANTHA J
11169 CEDAR CREEK FARMS RD
GLEN ST MARY, FL 32040

Authorized Person(s) Detail

Name & Address

Title PRES

STEWART, STEVE J
11169 CEDAR CREEK FARMS RD
GLEN ST MARY, FL 32040

Title VP

STEWART, SAMANTHA J
11169 CEDAR CREEK FARMS RD
GLEN ST MARY, FL 32040

Annual Reports

Report Year	Filed Date
-------------	------------

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000059869

Entity Name: CCF PROPERTIES LLC

Current Principal Place of Business:

11169 CEDAR CREEK FARMS RD
GLEN ST MARY, FL 32040

Current Mailing Address:

11169 CEDAR CREEK FARMS RD
GLEN ST MARY, FL 32040

FEI Number: 85-5194697

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STEWART, SAMANTHA J
11169 CEDAR CREEK FARMS RD
GLEN ST MARY, FL 32040 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 PRES
Name STEWART, STEVE J
Address 11169 CEDAR CREEK FARMS RD
City-State-Zip: GLEN ST MARY FL 32040

Title VP
Name STEWART, SAMANTHA J
Address 11169 CEDAR CREEK FARMS RD
City-State-Zip: GLEN ST MARY FL 32040

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: SAMANTHA STEWART

VP

02/05/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date