

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072198

Entity Name: SUSAN GLAD BOOKKEEPING, LLC**Current Principal Place of Business:**157 BRANDY HILLS DRIVE
PORT ORANGE, FL 32129**Current Mailing Address:**PO BOX 291844
PORT ORANGE, FL 32129 US**FEI Number:** 81-0656537**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GLAD, SUSAN S
157 BRANDY HILLS DRIVE
PORT ORANGE, FL 32129 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	PRESIDENT
Name	GLAD, SUSAN S
Address	157 BRANDY HILLS DRIVE
City-State-Zip:	PORT ORANGE FL 32129

Title	DIRECTOR
Name	GLAD, PETER J
Address	157 BRANDY HILLS DRIVE
City-State-Zip:	PORT ORANGE FL 32129

Title	TREASURER
Name	GLAD, BRYCE R
Address	157 BRANDY HILLS DRIVE
City-State-Zip:	PORT ORANGE FL 32129

Title	VP
Name	SPAULDING, VAUGHN D
Address	157 BRANDY HILLS DRIVE
City-State-Zip:	PORT ORANGE FL 32129

Title	ASST. TREASURER
Name	SPAULDING, JOSHUA R
Address	157 BRANDY HILLS DRIVE
City-State-Zip:	PORT ORANGE FL 32129

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: SUSAN GLAD

PRESIDENT

01/21/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date