## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107393

Entity Name: CLAMPET'S RETREAT, L.L.C.

**Current Principal Place of Business:** 

24768 HARBOUR VIEW DRIVE PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:** 

PO BOX 551260

JACKSONVILLE, FL 32255

FEI Number: 20-3749428 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANSBACHER & SCHNEIDER, P.A. 5150 BELFORT ROAD, BUILDING 100 JACKSONVILLE, FL 32256 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

**FILED** Mar 05, 2018

**Secretary of State** 

CC0425419708

Authorized Person(s) Detail:

Title MGRM

Title **MGRM** 

DEBIASE, MARK Name DEBIASE, MYRA Name

24768 HARBOUR VIEW DRIVE Address 24768 HARBOUR VIEW DRIVE Address City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082

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: MARK DEBIASE

Electronic Signature of Signing Authorized Person(s) Detail

**MANAGER** 

03/05/2018 Date