# DOCUMENT# L08000078344

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## Entity Name: THE SPICE & TEA EXCHANGE FRANCHISING, LLC

### **Current Principal Place of Business:**

407 MARSHALL CIRCLE ST. AUGUSTINE, FL 32086

### **Current Mailing Address:**

407 MARSHALL CIRCLE ST. AUGUSTINE, FL 32086 US

## FEI Number: 26-3202021

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

DAVIS, JEFFREY D 2011 BAYVIEW PLACE INDIAN ROCKS BEACH, FL 33785 US Certificate of Status Desired: No

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

#### Authorized Person(s) Detail :

Title	MGR	Title	VP
Name	THE SPICE & TEA EXCHANGE	Name	DAVIS, JEFFREY D
A daha a a		Address	2011 BAYVIEW PLACE
Address	407 MARSHALL CIRCLE	City-State-Zip:	INDIAN ROCKS BEACH FL 33785
City-State-Zip:	ST. AUGUSTINE FL 32086		
Title Name	VP REHLING, STEVEN M	Title	VP
		Name	REHLING, PENNY L
		Address City-State-Zip:	3024B COASTAL HIGHWAY
Address	3024B COASTAL HIGHWAY		ST. AUGUSTINE FL 32084
City-State-Zip:	ST. AUGUSTINE FL 32084		
Title	Р	Title	VP
		Name Address City-State-Zip:	FREEMAN, WILLIAM C
Name	FREEMAN, AMY P		1624 SEABREEZE DRIVE
Address	1624 SEABREEZE DRIVE		TARPON SPRINGS FL 34689
City-State-Zip:	TARPON SPRINGS FL 34689		

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY DAVIS

MANAGING PARTNER 02/11/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date

## FILED Feb 11, 2013 Secretary of State CC9455936794

Date