## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000017617

Entity Name: LEAMON COMBS JR. DECORATIVE CONCRETE CURBING

FILED
Jan 10, 2018
Secretary of State
CC5934470283

**Current Principal Place of Business:** 

PO. BOX 495722

PORT CHARLOTTE, FL 33949

**Current Mailing Address:** 

PO. BOX 495722

PORT CHARLOTTE. FL 33949

FEI Number: 26-5855371 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMBS, LEAMON JR 22387 SEYBURN TERR PORT CHARLOTTE, FL 33954 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 MGR Title MANAGER

Name COMBS, LEAMON JR. Name KREFTCOMBS, MADELINE

Address 22387 SEYBURN TERR. Address PO. BOX 495722

City-State-Zip: PORT CHARLOTTE FL 33954 City-State-Zip: PORT CHARLOTTE FL 33949

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.