

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000065604

Entity Name: TREASURE COAST TAXI SERVICE LLC

Current Principal Place of Business:

1040 SE LETHA CIRCLE, #4
STUART, FL 34994

Current Mailing Address:

1040 SE LETHA CIRCLE, #4
STUART, FL 34994 US

FEI Number: 42-2460466

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREENWOOD, JOHN
1040 SE LETHA CIRCLE, #4
STUART, FL 34994 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 MGRM
Name GREENWOOD, JOHN
Address 1040 SE LETHA CIRCLE APT 4
City-State-Zip: STUART FL 34994

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: JOHN GREENWOOD

MGRM

01/07/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date