

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000017432

**Entity Name:** ALVIS PROPERTIES LLC

**Current Principal Place of Business:**

6221 E BROADWAY AVE  
TAMPA, FL 33619

**Current Mailing Address:**

6221 E BROADWAY AVE  
TAMPA, FL 33619 US

**FEI Number:** 45-4466982

**Certificate of Status Desired:** No

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

ALVIS, SHARON  
6221 E BROADWAY AVE  
TAMPA, FL 33619 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                | Title           | MGRM                |
| Name            | ALVIS, JAMES HJR    | Name            | ALVIS, SHARON       |
| Address         | 6221 E BROADWAY AVE | Address         | 6221 E BROADWAY AVE |
| City-State-Zip: | TAMPA FL 33619      | City-State-Zip: | TAMPA FL 33619      |

*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:** SHARON ALVIS

**MGRM**

**02/01/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date