

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000068539

**Entity Name:** NTN LABS, LLC

**Current Principal Place of Business:**

2150 HARDEN BLVD  
LAKELAND, FL 33803

**Current Mailing Address:**

2150 HARDEN BLVD  
LAKELAND, FL 33803 US

**FEI Number:** 46-2792860

**Certificate of Status Desired:** No

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

FOSTER, BRUCE  
2150 HARDEN BLVD  
LAKELAND, FL 33803 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            CEO  
Name            FOSTER, BRUCE  
Address        2150 HARDEN BLVD  
City-State-Zip: LAKELAND FL 33803

Title            MGR  
Name            RICHARDS, HARLEY M  
Address        2150 HARDEN BLVD  
City-State-Zip: LAKELAND FL 33803

Title            MGR  
Name            KIRKPATRICK, DAVID  
Address        2150 HARDEN BLVD  
City-State-Zip: LAKELAND FL 33803

Title            MGR  
Name            FOSTER, BRUCE  
Address        2150 HARDEN BLVD  
City-State-Zip: LAKELAND FL 33803

Title            CIO  
Name            GENZ, JASON  
Address        2150 HARDEN BLVD  
City-State-Zip: LAKELAND FL 33803

*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:** HARLEY RICHARDS

**MGR**

**02/12/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date