

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000136575

Entity Name: ANFIELD SERVICES LLC

Current Principal Place of Business:

1014 SE SPINNAKER AVENUE
PORT ST LUCIE, FL 34983

Current Mailing Address:

1014 SE SPINNAKER AVENUE
PORT ST LUCIE, FL 34983

FEI Number: 46-4040940

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORGAN, NEIL
1014 SE SPINNAKER AVE
PORT ST LUCIE, FL 34983 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 MORGAN, NEIL
Address 1014 SE SPINNAKER AVE
City-State-Zip: PORT ST LUCIE FL 34983

Title VP
Name MORGAN, ALAN K
Address 1014 SE SPINNAKER AVENUE
City-State-Zip: PORT ST LUCIE FL 34983

Title MANAGER
Name MORGAN, MAYA ROSE
Address 1014 SE SPINNAKER AVENUE
City-State-Zip: PORT ST LUCIE FL 34983

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: NEIL MORGAN

MGRM

03/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date