

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000163284

Entity Name: MADELINE KREFT COMBS DECORATIVE CURBING LIMITED LIABILITY COMPANY

FILED
Apr 25, 2017
Secretary of State
CC1595350633

Current Principal Place of Business:

22387 SEYBURN TER.
PORT CHARLOTTE, FL 33954

Current Mailing Address:

22387 SEYBURN TER.
PORT CHARLOTTE, FL 33954 US

FEI Number: 59-5366460

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KREFTCOMBS, MADELINE R
22387 SEYBURN TER.
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 MGRM
Name DAVIS, ASTRO
Address 1210 TALBOT ST.
City-State-Zip: PORT CHARLOTTE FL 33952

Title MGR
Name KREFTCOMBS, MADELINE R
Address 22387 SEYBURN TERR
City-State-Zip: PORT CHARLOTTE FL 33954

Title MGRM
Name COMBS, LEAMON JR.
Address 22387 SEYBURN TER
City-State-Zip: PORT CHARLOTTE FL 33954

Title MGRM
Name BLOOM, JOHNATHON
Address 1210 TALBOT ST
City-State-Zip: PORT CHARLOTTE FL 33952

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: MADELINE KREFTCOMBS

MGR

04/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date