

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000147730

**Entity Name:** GFS CATERING LLC

**Current Principal Place of Business:**

2849 W. GAFFNEY RD  
AVON PARK, FL 33825

**Current Mailing Address:**

P.O. BOX 61  
AVON PARK, FL 33826

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

WILLIAMS-LEWIS, TYMICA E  
2849 W. GAFFNEY RD  
AVON PARK, FL 33825 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           MANAGER  
Name           WILLIAMS-LEWIS, TYMICA EARLENE  
Address        P.O. BOX 61  
City-State-Zip: AVON PARK FL 33826

*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:** TYMICA WILLIAMS-LEWIS

**OWNER**

**04/30/2017**

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

\_\_\_\_\_ Date