

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000176847

Entity Name: CHRISHIRE 107, LLC

Current Principal Place of Business:

372 HONEYEATER DRIVE
WALLIGAN, 4655

Current Mailing Address:

372 HONEYEATER DRIVE
WALLIGAN, 4655 AU

FEI Number: 30-0846592

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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 MANAGING MEMBER
Name MASSA CORPORATION PTY LTD,
 TRUSTEE
Address 372 HONEYEATER DRIVE
City-State-Zip: WALLIGAN QLD 4655

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: MASSA CORPORATION PTY LTD, TRUSTEE ABOOD MANAGING MEMBER

03/09/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date