## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000009240

**Entity Name: VANCE DAVIS PLLC** 

**Current Principal Place of Business:** 

510 LAKE SHORE DRIVE

APT 2

LAKE PARK, FL 33403-3562

**Current Mailing Address:** 

510 LAKE SHORE DRIVE

APT 2

LAKE PARK, FL 33403-3562 US

FEI Number: 47-2821012 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, VANCE 510 LAKE SHORE DR.

LAKE PARK, FL 33403 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: VANCE DAVIS 02/08/2019

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title OWN Title OWN

Name DAVIS, VANCE Name DAVIS, VANCE

510 LAKE SHORE DRIVE 510 LAKE SHORE DRIVE Address Address

APT 2 APT 2

City-State-Zip: LAKE PARK FL 33403-3562 City-State-Zip: LAKE PARK FL 33403-3562

Title OWN Title OWN

Name DAVIS, VANCE Name DAVIS, VANCE

Address 510 LAKE SHORE DRIVE Address 510 LAKE SHORE DRIVE

APT 2 APT 2

City-State-Zip: LAKE PARK FL 33403-3562 City-State-Zip: LAKE PARK FL 33403-3562

Title OWN Title **OWN** 

DAVIS, VANCE DAVIS, VANCE Name Name

510 LAKE SHORE DRIVE 510 LAKE SHORE DRIVE Address Address APT 2

APT 2

City-State-Zip: LAKE PARK FL 33403-3562 City-State-Zip: LAKE PARK FL 33403-3562

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.

02/08/2019 SIGNATURE: VANCE DAVIS **OWNER** 

**FILED** Feb 08, 2019

**Secretary of State** 

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