

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000090094

**Entity Name:** CHARLES J KRATZ LLC

**Current Principal Place of Business:**

324 LAUREL HOLLOW DRIVE  
NOKOMIS, FL 34275

**Current Mailing Address:**

PO BOX 1093  
OSPREY, FL 34229 US

**FEI Number:** 47-4049329

**Certificate of Status Desired:** No

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

KRATZ, MARTHA U  
324 LAUREL HOLLOW DRIVE  
NOKOMIS, FL 34275 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:** MARTHA U KRATZ

03/30/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name KRATZ, CHARLES J  
Address 324 LAUREL HOLLOW DRIVE  
City-State-Zip: NOKOMIS FL 34275

Title AR  
Name MARKIEWICZ, KIMBERLY A  
Address 324 LAUREL HOLLOW DRIVE  
City-State-Zip: NOKOMIS FL 34275

*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:** KIMBERLY M ARKIEWICZ

AR

03/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date