Current Principal Place of Business: 15215 GULF BLVD MADEIRA BEACH, FL 33708	
Current Mailing Address:	
15215 GULF BLVD MADEIRA BEACH, FL 33708 US	
FEI Number: 47-4892175	Certificate of Status Desired: No
Name and Address of Current Registered Agent:	
MCCLINTOCK, KATHRYN CARREL 15215 GULF BLVD	
MADEIRA BEACH, FL 33708 US The above named entity submits this statement for the purpose of changing its registered office or regi	tered agent, or both, in the State of Florida.
MADEIRA BEACH, FL 33708 US	tered agent, or both, in the State of Florida. $02/14/2023$
MADEIRA BEACH, FL 33708 US The above named entity submits this statement for the purpose of changing its registered office or registered.	
MADEIRA BEACH, FL 33708 US The above named entity submits this statement for the purpose of changing its registered office or regis SIGNATURE: KATHRYN C MCCLINTOCK	02/14/2023
MADEIRA BEACH, FL 33708 US The above named entity submits this statement for the purpose of changing its registered office or regis SIGNATURE: KATHRYN C MCCLINTOCK Electronic Signature of Registered Agent	02/14/2023
MADEIRA BEACH, FL 33708 US The above named entity submits this statement for the purpose of changing its registered office or regis SIGNATURE: KATHRYN C MCCLINTOCK Electronic Signature of Registered Agent Authorized Person(s) Detail : Title AMBR Title Name REVOCABLE LIVING TRUST OF Name	02/14/2023 Date
MADEIRA BEACH, FL 33708 US The above named entity submits this statement for the purpose of changing its registered office or regis SIGNATURE: KATHRYN C MCCLINTOCK Electronic Signature of Registered Agent Authorized Person(s) Detail : Title AMBR Title	02/14/2023 Date
MADEIRA BEACH, FL 33708 US The above named entity submits this statement for the purpose of changing its registered office or regis SIGNATURE: KATHRYN C MCCLINTOCK Electronic Signature of Registered Agent Authorized Person(s) Detail : Title AMBR Title Name REVOCABLE LIVING TRUST OF Name KATHRYN MCCLINTOCK DATED Address	02/14/2023 Date AMBR MCCLINTOCK, SARA 15215 GULF BLVD

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: KATHRYN C MCCLINTOCK

OWNER

## 02/14/2023 Date

Electronic Signature of Signing Authorized Person(s) Detail

# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000141400

Entity Name: MCCLINTOCK BUILDING LLC

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FILED Feb 14, 2023 **Secretary of State** 4088087415CC