

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000104786

**Entity Name:** KIP AND SON LLC

**Current Principal Place of Business:**

2400 N BEACH RD #6  
ENGLEWOOD, FL 34223

**Current Mailing Address:**

PO BOX 84  
ENGLEWOOD, FL 34295 US

**FEI Number:** 06-2927772

**Certificate of Status Desired:** No

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

MILLER, DAVID C  
2400 N BEACH RD #6  
ENGLEWOOD, FL 34223 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            AMBR  
Name            MILLER, DAVID C  
Address        2400 N BEACH RD #6  
City-State-Zip: ENGLEWOOD FL 34223

Title            AMBR  
Name            MILLER, PATRICIA P  
Address        2400 N BEACH RD #6  
City-State-Zip: ENGLEWOOD FL 34223

*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:** DAVID C MILLER

**PRESIDENT**

**01/12/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date