

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000123273

**Entity Name:** FIRST IN LAST OUT RESIDENTIAL SERVICES, LLC

**Current Principal Place of Business:**

18150 DICKENS AVE.  
PORT CHARLOTTE, FL 33954

**Current Mailing Address:**

18150 DICKENS AVE.  
PORT CHARLOTTE, FL 33954 UN

**FEI Number: 81-3195821**

**Certificate of Status Desired: Yes**

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

STURGES, ERNEST  
701 JC CENTER COURT SUITE 3  
PORT CHARLOTTE, FL 33954 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 MGRM  
Name WILCOX, JAMES  
Address 18150 DICKENS AVE.  
City-State-Zip: PORT CHARLOTTE FL 33954

Title MGRM  
Name WILCOX, PAMELA  
Address 18150 DICKENS AVE.  
City-State-Zip: PORT CHARLOTTE FL 33954

*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: JAMES WILCOX**

**MANAGER**

**02/16/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date