# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000216220

Entity Name: BCSP, LLC

# **Current Principal Place of Business:**

221 N HOGAN ST #306 JACKSONVILLE, FL 32202

# **Current Mailing Address:**

221 N HOGAN ST #306 JACKSONVILLE, FL 32202 US

# FEI Number: 81-4577829

### Name and Address of Current Registered Agent:

BAKER, TIMOTHY 221 N HOGAN ST #306 JACKSONVILLE, FL 32202 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

### Authorized Person(s) Detail :

Title	MGR
Name	BAKER, TIMOTHY
Address	221 N HOGAN ST #306
City-State-Zip:	JACKSONVILLE FL 32202

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.

MGR

# SIGNATURE: TIMOTHY BAKER

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

04/12/2018 Date