

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000216820

Entity Name: JBT CONSULTING L.L.C.**Current Principal Place of Business:**1018 LOUISIANA AVE
CLEWISTON, FL 33440**Current Mailing Address:**PO BOX 764
CLEWISTON, FL 33440 US**FEI Number:** 20-0000285**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOLMES, LAVITA
901 FLORIDA AVE
CLEWISTON, FL 33440 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 OWNER
Name TAYLOR, JANET BRUMFIELD
Address 1018 LOUISIANA AVE
City-State-Zip: CLEWISTON FL 33440

Title AR
Name HOLMES LAVITA
Address 901 FLORIDA AVE
City-State-Zip: CLEWISTON FL 33440

Title AUTHORIZED REPRESENTATIVE
Name LAWSON, HELEN ELIZABETH
Address 1008 BAYBERRY LOOP
City-State-Zip: CLEWISTON FL 33440

Title AUTHORIZED REPRESENTATIVE
Name DIXON, WALTER
Address 902 CENTENNIAL AVE
City-State-Zip: DELTONA FL 32738

Title AUTHORIZED REPRESENTATIVE
Name DIXON, ROGER
Address 10504 BENEVA DR
City-State-Zip: TAMPA FL 33647

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: JANET B. TAYLOR

OWNER

02/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date