

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000006548

Entity Name: GAMERS RESPAWN LLC

Current Principal Place of Business:

865 PALM BAY RD NE
101
WEST MELBOURNE, FL 32904

Current Mailing Address:

865 PALM BAY RD NE
101
WEST MELBOURNE, FL 32904 US

FEI Number: 81-4991746

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BLOUIN, CHRISTOPHER R
1157 SANDDUNE LANE
203
MELBOURNE, FL 32934 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 MGR
Name SCOTT, STEVEN M
Address 3012 FOUNTAINHEAD CIR
140
City-State-Zip: MELBOURNE FL 32934

Title MGR
Name BLOUIN, CHRISTOPHER R
Address 1157 SANDDUNE LANE
203
City-State-Zip: MELBOURNE FL 32935

Title MGR
Name LONG, RUBEN EARL
Address 3012 FOUNTIANHEAD CIR
140
City-State-Zip: MELBOURNE FL 32934

Title MGR
Name GARNER, RHYAN ALLEN
Address 2255 LAUNCH CT
378
City-State-Zip: WEST MELBOURNE FL 32904

Title MGR
Name HOWELL, JOSHUA JAMES
Address 1138 BUTTERCUP LN
City-State-Zip: ORLANDO FL 32825

Title MGR
Name SCHULZE, CHRISTOPHER BERNB
Address 2249 HOME AGAIN
City-State-Zip: APOPKA FL 32712

Title MGR
Name LEWIS, AUSTIN SIMON
Address 2860 FLORESTA DR
City-State-Zip: PALM BAY FL 32905

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: STEVEN M SCOTT

MGR

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date