

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000049017

Entity Name: BIKE TRAIL, LLC

Current Principal Place of Business:

2255 NW 4TH PL
GAINESVILLE, FL 32603

Current Mailing Address:

2255 NW 4TH PL
GAINESVILLE, FL 32603

FEI Number: 82-1022350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE LOSEN, MARGARET E
2255 NW 4TH PL
GAINESVILLE, FL 32603 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 THE LOSEN, WELLS S
Address 2255 NW 4TH PL
City-State-Zip: GAINESVILLE FL 32603

Title MGR
Name THE LOSEN, MARGARET E
Address 2255 NW 4TH PL
City-State-Zip: GAINESVILLE FL 32603

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: MARGARET E THE LOSEN

MANAGER

03/19/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date