

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000203143

**Entity Name:** CENTRAL FLORIDA TREE & DEBRIS, LLC

**Current Principal Place of Business:**

15000 CITRUS COUNTRY DRIVE  
324  
DADE CITY, FL 33523

**Current Mailing Address:**

15000 CITRUS COUNTRY DRIVE  
324  
DADE CITY, FL 33523 US

**FEI Number:** 82-2964825

**Certificate of Status Desired:** No

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

VAN ALLEN, ROBERT C  
12445 US HWY 301  
DADE CITY, FL 33525 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 AUTHORIZED MEMBER, PRINCIPAL  
Name VAN ALLEN, ROBERT C  
Address 12445 US HWY 301  
City-State-Zip: DADE CITY FL 33525

Title OFFICER  
Name CARRILLO, ALFREDO  
Address 32818 OLD SAINT JOE ROAD  
City-State-Zip: DADE CITY FL 33525

Title AMBR  
Name CARRILLO, ALFREDO  
Address 32818 OLD SAINT JOE RD  
City-State-Zip: DADE CITY FL 33525

*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:** ROBERT DEBRIS VAN ALLEN

**OWNER**

**03/03/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date