# 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: MELISSA J. KNIGHT

Electronic Signature of Signing Authorized Person(s) Detail

## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT# L17000232022

Entity Name: GLAUSIER KNIGHT, PLLC

## **Current Principal Place of Business:**

400 NORTH ASHLEY DRIVE **SUITE 2020** TAMPA, FL 33602

## **Current Mailing Address:**

400 NORTH ASHLEY DRIVE **SUITE 2020** TAMPA, FL 33602 US

## FEI Number: 82-3386069

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

KNIGHT, MELISSA J 400 NORTH ASHLEY DRIVE **SUITE 2020** TAMPA, FL 33602 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	: MELISSA J. KNIGHT			01/11/2018
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MANAGER	Title	MANAGER	
Name	GLAUSIER, CHARLES EVANS ESQ.	Name	KNIGHT, MELISSA J ESQ.	
Address	400 NORTH ASHLEY DRIVE SUITE 2020	Address	400 NORTH ASHLEY DRIVE SUITE 2020	
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602	

Certificate of Status Desired: No

MANAGER

01/11/2018 Date

#### FILED Jan 11, 2018 Secretary of State CC1931223062