

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000006398

Entity Name: CHAPCHARTERS LLC

Current Principal Place of Business:

610 SKYVIEW AVE
CLEARWATER, FL 33756

Current Mailing Address:

610 SKYVIEW AVE
CLEARWATER, FL 33756

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAPMAN, STEPHEN A
610 SKYVIEW AVE
CLEARWATER, FL 33756 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 CHAPMAN, STEPHEN A
Address 610 SKYVIEW AVE
City-State-Zip: CLEARWATER FL 33756

Title AP
Name CHAPMAN, BRITTANY G
Address 610 SKYVUEW AVE
City-State-Zip: CLEARWATER FL 33756

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: STEPHEN CHAPMAN

MR

01/23/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date