

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000017895

**Entity Name:** MALSALGATOR, LLC

**Current Principal Place of Business:**

1529 3RD ST. SOUTH  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

1529 3RD ST. SOUTH  
JACKSONVILLE BEACH, FL 32250

**FEI Number:** 82-4127850

**Certificate of Status Desired:** No

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

THOMAS, M. SCOTT  
50 N LAURA ST  
STE 3000  
JACKSONVILLE, FL 32202 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:** M. SCOTT THOMAS

02/12/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LOWERY, MARK A  
Address 1529 3RD ST. SOUTH  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*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:** MARK LOWERY

02/12/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date