## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000047190

Entity Name: MATCHPOINT CAPITAL PARTNERS LLC

Current Principal Place of Business:

110 LOGAN LANE SUITE 3 SANTA ROSA BEACH FL 32459

**Current Mailing Address:** 

110 LOGAN LANE

SUITE 3

SANTA ROSA BEACH FL 32459 US

FEI Number: 82-4537569 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATCHPOINT ADVISORS LLC 110 LOGAN LANE SUITE 3 SANTA ROSA BEACH, FL 32459 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:

City-State-Zip:

Electronic Signature of Registered Agent Date

Title

AUTHORIZED REPRESENTATIVE

Authorized Person(s) Detail:

Title MMBR Title AUTHORIZED REPRESENTATIVE

Name WALKER, VALERIE Name BURCH, CHRISTOPHER

Address 2026 PINE ISLAND CIRCLE Address 110 LOGAN LANE

MIRAMAR BEACH FL 32550

City-State-Zip: SANTA ROSA BEACH FL 32459

Title AUTHORIZED REPRESENTATIVE

Name ELLINGTON, MATTHEW R

Name MUSICK, JEFFREY LANCE

Address 110 LOGAN LANE SUITE 3 Address 110 LOGAN LANE

SUITE 3

City-State-Zip: SANTA ROSA BEACH FL 32459

City-State-Zip: SANTA ROSA BEACH FL 32459

Title AUTHORIZED REPRESENTATIVE

Name WALKER, MATTHEW

Address 110 LOGAN LANE SUITE 3

City-State-Zip: SANTA ROSA BEACH FL 32459

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: MATTHEW WALKER

07/20/2020

FILED Jul 20, 2020

**Secretary of State** 

9371584132CC

Electronic Signature of Signing Authorized Person(s) Detail

Date