

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000055172

**Entity Name:** JOHN PAUL KIRKPATRICK, LLC

**Current Principal Place of Business:**

15766 NE BOB SANDERS RD  
HOSFORD, FL 32334

**Current Mailing Address:**

15766 NE BOB SANDERS RD  
HOSFORD, FL 32334

**FEI Number:** 82-4614112

**Certificate of Status Desired:** No

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

KIRKPATRICK, JOHN PAUL  
15766 NE BOB SANDERS RD  
HOSFORD, FL 32334 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 KIRKPATRICK, JOHN PAUL  
Address 15766 NE BOB SANDERS RD  
City-State-Zip: HOSFORD FL 32334

*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:** JOHN PAUL KIRKPATRICK

MGR

04/11/2019

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date