

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000118307

**Entity Name:** SCHMEDES MCALLISTER PLLC

**Current Principal Place of Business:**

223 PINE STREET  
WEST PALM BEACH, FL 33407

**Current Mailing Address:**

223 PINE STREET  
WEST PALM BEACH, FL 33407 US

**FEI Number:** 83-0546082

**Certificate of Status Desired:** No

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

SCHMEDES, TIMOTHY  
223 PINE STREET  
WEST PALM BEACH, FL 33407 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:** TIMOTHY SCHMEDES

02/11/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SCHMEDES, TIMOTHY  
Address 223 PINE STREET  
City-State-Zip: WEST PALM BEACH FL 33407

Title AMBR  
Name MCALLISTER, CARTER  
Address 223 PINE STREET  
City-State-Zip: WEST PALM BEACH FL 33407

*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:** TIMOTHY H SCHMEDES

MEMBER

02/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date