

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000229482

**Entity Name:** J T COLLIER LLC

**Current Principal Place of Business:**

825 OAKVIEW DR  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

825 OAKVIEW DR  
NEW SMYRNA BEACH, FL 32168

**FEI Number:** 83-2069381

**Certificate of Status Desired:** No

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

COLLIER, JOHN T  
825 OAKVIEW DR  
NEW SMYRNA BEACH, FL 32168 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 COLLIER, JOHN T  
Address 825 OAKVIEW DR  
City-State-Zip: NEW SMYRNA BEACH FL 32180

*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 T COLLIER

MGR

03/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date