

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000290303

Entity Name: OVERWATCH MANAGEMENT SYSTEMS LIMITED LIABILITY COMPANY**FILED**
Jan 26, 2022
Secretary of State
355055332CC**Current Principal Place of Business:**9 WEEKEWACHEE CIR.
DESTIN, FL 32541**Current Mailing Address:**9 WEEKEWACHEE CIR.
DESTIN, FL 32541 US**FEI Number: 83-3000601****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FLETCHER, BRADFORD A
9 WEEKEWACHEE CIR.
DESTIN, FL 32541 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 FLETCHER, BRADFORD A
Address 9 WEEKEWACHEE CIR.
City-State-Zip: DESTIN FL 32541Title AMBR
Name FLETCHER, LISA A
Address 9 WEEKEWACHEE CIR.
City-State-Zip: DESTIN FL 32541Title AMBR
Name MATYAC, ASHLEY
Address 148 LOLA CIR.
City-State-Zip: DESTIN FL 32541

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: BRADFORD A. FLETCHER**MANAGING MEMBER****01/26/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date