

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000182450

Entity Name: DNT TAMPA LLC**Current Principal Place of Business:**12594 STREAMDALE
TAMPA, FL 33626**Current Mailing Address:**12594 STREAMDALE
TAMPA, FL 33626 UN**FEI Number:** 84-3171470**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STOPNYTSKY, NATHAN J
12594 STREAMDALE DR
TAMPA, FL 33626 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	ROSSI, DEANA
Address	12594 STREAMDALE DR
City-State-Zip:	TAMPA FL 33626
Title	MGR
Name	ROSSI, GABRIELLA
Address	5306 MACOSO CT
City-State-Zip:	NEW PORT RICHEY FL 34655

Title	MGR
Name	ROSSI, TONIA
Address	4221 W SPRUCE ST APT 1414
City-State-Zip:	TAMPA FL 33607
Title	MANAGER
Name	STOPNYTSKY , NATHAN
Address	12594 STREAMDALE
City-State-Zip:	TAMPA 33626

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: NATHAN STOPNYTSKY

MGR

05/01/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date