

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000217370

**Entity Name:** WEAVER FAMILY TRUST LLC

**Current Principal Place of Business:**

1920 SILVER STAR ROAD  
ORLANDO, FL 32804

**Current Mailing Address:**

1920 SILVER STAR ROAD  
ORLANDO, FL 32804 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GLOBAL RENOVATION AND DEVELOPMENT INC  
1920 SILVER STAR ROAD  
ORLANDO, FL 32804 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           | AMBR                  | Title           | AUTHORIZED MEMBER   |
| Name            | WEAVER, HENRY T       | Name            | WEAVER, LYNNETTE C  |
| Address         | 1920 SILVER STAR ROAD | Address         | 1920 SILVER STAR RD |
| City-State-Zip: | ORLANDO FL 32804      | City-State-Zip: | ORLANDO FL 32804    |

*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:** LYNNETTE C WEAVER

**AUTHORIZED MEMBER**

**04/15/2020**

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

\_\_\_\_\_  
Date