## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000293910

**Entity Name: ALLASPECTSPROPERTY LLC** 

**Current Principal Place of Business:** 

403 SHARON ST

BROOKSVILLE, FL 34601

**Current Mailing Address:** 

403 SHARON ST

BROOKSVILLE, FL 34601

FEI Number: 82-5372275 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COVEY, HALEY C 403 SHARON ST BROOKSVILLE, FL 34601 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

FILED Apr 22, 2020

**Secretary of State** 

4195106689CC

## Authorized Person(s) Detail:

Title MGR

Name COVEY, TIMOTHY E Address 403 SHARON ST

City-State-Zip: BROOKSVILLE FL 34601

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.

**MGR** 

SIGNATURE: TIMOTHY COVEY