## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000733

Entity Name: SWAT 24 LLC

**Current Principal Place of Business:** 

1774 SW BILTMORE ST. PORT ST LUCIE. FL 34984

**Current Mailing Address:** 

1774 SW BILTMORE ST. PORT ST LUCIE. FL 34984

FEI Number: 72-1381440 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLEMAN, JASON O 2412 SE WISHBONE RD. PORT ST. LUCIE, FL 34952 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** Mar 01, 2016

**Secretary of State** 

CC2962288026

Authorized Person(s) Detail:

Title MGR Title **MBR** 

Name Name COLEMAN, JASON O COLEMAN, SONYA R 2412 SE WISHBONE RD. Address 2412 SE WISHBONE RD Address City-State-Zip: PORT SAINT LUCIE FL 34952 City-State-Zip: PORT ST LUCIE FL 34952

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: JASON O. COLEMAN

**MGR** 

03/01/2016