## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002873

Entity Name: GAYLON BLACK, LLC

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**Current Principal Place of Business:** 

138 SPRING VALLEY LOOP ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:** 

P.O. BOX 161547

ALTAMONTE SPRINGS. FL 32716 US

FEI Number: 59-3639594 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLACK, GAYLON D 138 SPRING VALLEY LOOP ALTAMONTE SPRINGS, FL 32714 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 Feb 09, 2020

**Secretary of State** 

3339715068CC

Authorized Person(s) Detail:

Title MGRM

GRM Title MGR

Name BLACK , GAYLON D Name BLACK, PATTI J

Address P.O. BOX 161547 Address 138 SPRING VALLEY LOOP

City-State-Zip: ALTAMONTE SPRINGS FL 32716 City-State-Zip: ALTAMONTE SPRINGS FL 32714

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.

**MGRM** 

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: GAYLON D BLACK

02/09/2020

Date