

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000016307

**FILED  
Jan 16, 2018  
Secretary of State  
CC5400815383**

**Entity Name:** TOM R. AND ASSOCIATES, LLC

**Current Principal Place of Business:**

11 SE SECOND AVE  
GAINESVILLE, FL 32601

**Current Mailing Address:**

11 SE SECOND AVE  
GAINESVILLE, FL 32601

**FEI Number:** 59-3745849

**Certificate of Status Desired:** No

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

RUSH, ROBERT A  
11 SE SECOND AVE  
GAINESVILLE, FL 32601 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 RUSH, ROBERT A  
Address 11 SE SECOND AVE  
City-State-Zip: GAINESVILLE FL 32601

Title MGR  
Name SPERRING, TOM RSR.  
Address 2928 N.W. 22ND ST.  
City-State-Zip: GAINESVILLE FL 32605

Title MGR  
Name SPERRING, PHYLLIS  
Address 2928 N.W. 22ND ST.  
City-State-Zip: GAINESVILLE FL 32605

*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:** ROBERT RUSH

**MGR**

**01/16/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date