

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000001776

Entity Name: TRICO OCALA, LLC

Current Principal Place of Business:

2801 SW COLLEGE ROAD, SUITE 9
OCALA, FL 34474

Current Mailing Address:

2801 SW COLLEGE ROAD, SUITE 9
OCALA, FL 34474 US

FEI Number: 20-2212731

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MACKAY, DAVID L
2801 SW COLLEGE ROAD, SUITE 9
OCALA, FL 34474 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 MGRM
Name MACKAY, DAVID L
Address 2801 SW COLLEGE RD SUITE 9
City-State-Zip: Ocala FL 34474

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: DAVID L MACKAY

MGR

02/07/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date