## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035609

Entity Name: DAVIDSON CTH, LLC

**Current Principal Place of Business:** 

1800 GRIFFITH RD. LAMONT, FL 32336

**Current Mailing Address:** 

P.O. BOX 76

LAMONT. FL 32336

FEI Number: 52-2458272 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIDSON, C. LINDEN 1800 GRIFFITH RD. LAMONT, FL 32336 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 10, 2017

**Secretary of State** 

CC0205893671

Authorized Person(s) Detail:

Title MGRM Title

NameDAVIDSON, C LINDENNameDAVIDSON, JOHN LAddress1800 GRIFFITH RDAddress323 COOK STREET

City-State-Zip: LAMONT FL 32336 City-State-Zip: ST GEORGE ISLAND FL 32328

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: JOHN DAVIDSON

MANAGER

**MGRM** 

02/10/2017