

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000069737

**Entity Name:** BYRD OFFICE PROPERTIES LLC

**Current Principal Place of Business:**

2835 HAMMOCK DRIVE  
PLANT CITY, FL 33566

**Current Mailing Address:**

2835 HAMMOCK DRIVE  
PLANT CITY, FL 33566

**FEI Number:** 20-3426736

**Certificate of Status Desired:** No

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

BYRD, MELANE S  
2835 HAMMOCK DRIVE  
PLANT CITY, FL 33566 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 AUTHORIZED MEMBER, MANAGER  
Name BYRD, MELANE S  
Address 2835 HAMMOCK DRIVE  
City-State-Zip: PLANT CITY FL 33566

Title AUTHORIZED MEMBER, MANAGER  
Name BYRD JR, JOHNNIE B  
Address 2835 HAMMOCK DRIVE  
City-State-Zip: PLANT CITY FL 33566

*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:** JOHNNIE B BYRD JR

**MEMBER MANAGER**

**03/08/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date