

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000077671

Entity Name: FLT, LLC**Current Principal Place of Business:**3802 SKYLINE BLVD
CAPE CORAL, FL 33914**Current Mailing Address:**3802 SKYLINE BLVD
CAPE CORAL, FL 33914 US**FEI Number:** 13-4303895**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FULMER, TRACEY R
3802 SKYLINE BLVD
CAPE CORAL, FL 33914 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	FULMER, TRACEY R
Address	3802 SKYLINE BLVD
City-State-Zip:	CAPE CORAL FL 33914

Title	MGRM
Name	FULMER, RANDY A
Address	3802 SKYLINE BLVD
City-State-Zip:	CAPE CORAL FL 33914

Title	SEC
Name	FULMER, R TRACEY A
Address	3802 SKYLINE BLVD
City-State-Zip:	CAPE CORAL FL 33914

Title	TREA
Name	FULMER, R TRACEY A
Address	3802 SKYLINE BLVD
City-State-Zip:	CAPE CORAL FL 33914

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: R TRACEY FULMER**MANAGER****01/11/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date