## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056170

Entity Name: THE CART DOCTOR, L.L.C.

**Current Principal Place of Business:** 

3511 ST. AUGUSTINE RD. JACKSONVILLE, FL 32207

**Current Mailing Address:** 

PO BOX 48061

JACKSONVILLE, FL 32247-8061

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHUTE, MICHAEL D 3511 ST. AUGUSTINE ROAD JACKSONVILLE, FL 32207 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 Jan 14, 2019

**Secretary of State** 

3877249917CC

Authorized Person(s) Detail:

Title MGRM

GRM Title MGRM

Name CHUTE, MICHAEL D Name CHUTE, CYNTHIA K

Address 3511 ST AUGUSTINE RD Address 3511 ST. AUGUSTINE RD

City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip: JACKSONVILLE FL 32207

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: CYNTHIA K.CHUTE

**MGRM** 

01/14/2019