

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000111917

**Entity Name:** CRIST ENTERPRISES, LLC

**Current Principal Place of Business:**

4365 GATOR TRACE LANE  
FT. PIERCE, FL 34982

**Current Mailing Address:**

4365 GATOR TRACE LANE  
FT. PIERCE, FL 34982

**FEI Number:** 20-5955919

**Certificate of Status Desired:** No

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

CRIST, LINDA K  
4365 GATOR TRACE LANE  
FT. PIERCE, FL 34982 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	MGR	Title	MGR
Name	CRIST, JAMES A	Name	CRIST, LINDA K
Address	4365 GATOR TRACE LANE	Address	4365 GATOR TRACE LANE
City-State-Zip:	FT. PIERCE FL 34982	City-State-Zip:	FT. PIERCE FL 34982

*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:** LINDA CRIST

**OWNER**

**01/19/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date