

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000000098

Entity Name: C. LUTHER PICKELS & ASSOCIATES, LLC**Current Principal Place of Business:**990 S. JEFFERSON ST
MONTICELLO, FL 32344**Current Mailing Address:**PO BOX 413
MONTICELLO, FL 32345 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PICKELS, BARBARA ANN
990 S. JEFFERSON ST
MONTICELLO, FL 32344 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:** BARBARA ANN PICKELS

06/05/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	PICKELS, BARBARA
Address	PO BOX 413
City-State-Zip:	MONTICELLO FL 32345

Title	MANAGER
Name	DAILEY, MATTHEW ROBERT
Address	PO BOX 413
City-State-Zip:	MONTICELLO FL 32345

Title	MANAGER
Name	DAILEY, JOSHUA AARON
Address	PO BOX 413
City-State-Zip:	MONTICELLO FL 32345

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: BARBARA PICKELS

MANAGING MEMBER

06/05/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date