

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000060462

**FILED**  
**Jan 11, 2014**  
**Secretary of State**  
**CC5569089597**

**Entity Name:** BISHOPS COFFEE AND TEA LLC

**Current Principal Place of Business:**

2387 HWY 98 WEST  
UNIT D  
MARY ESTHER, FL 32569

**Current Mailing Address:**

2387 HWY 98 WEST  
UNIT D  
MARY ESTHER, FL 32569

**FEI Number:** 26-0127220

**Certificate of Status Desired:** Yes

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

BISHOP, TIONNA  
427 BRIDGEWATER CT  
MARY ESTHER, FL 32569 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	BISHOP, TIONNA
Address	427 BRIDGEWATER CT
City-State-Zip:	MARY ESTHER FL 32569
Title	MGRM
Name	BISHOP, TIONNA MOWNER
Address	427 BRIDGEWATER CT.
City-State-Zip:	MARY ESTHER FL 32569
Title	MGRM
Name	BISHOP, TIONNA MOWNER
Address	427 BRIDGEWATER CT.
City-State-Zip:	MARY ESTHER FL 32569

Title	MGRM
Name	BISHOP, TIONNA MOWNER
Address	427 BRIDGEWATER CT.
City-State-Zip:	MARY ESTHER FL 32569
Title	MGRM
Name	BISHOP, TIONNA MOWNER
Address	427 BRIDGEWATER CT.
City-State-Zip:	MARY ESTHER FL 32569
Title	MGRM
Name	BISHOP, TIONNA MOWNER
Address	427 BRIDGEWATER CT.
City-State-Zip:	MARY ESTHER FL 32569

*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:** TIONNA BISHOP

**OWNER**

**01/11/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date