

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000023327

Entity Name: FRCWTC, LLC**Current Principal Place of Business:**323 OCEAN CREST DRIVE
PALM COAST, FL 32137**Current Mailing Address:**PO BOX 1594
TYBEE ISLAND, GA 31328 US**FEI Number:** 26-4551322**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CLARK, WALTER TJR.
323 OCEAN CREST DRIVE
PALM COAST, FL 32137 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	CLARK, WALTER TJR.
Address	323 OCEAN CREST DRIVE
City-State-Zip:	PALM COAST FL 32137

Title	MGRM
Name	CLARK, FRANCES R
Address	323 OCEAN CREST DRIVE
City-State-Zip:	PALM COAST FL 32137

Title	MGRM
Name	BECKER, STACEY
Address	281 KING ROAD NW
City-State-Zip:	ATLANTA GA 30342

Title	MGRM
Name	CLARK, WALTER TIII
Address	218 CATALINA, P.O. BOX 1594
City-State-Zip:	TYBEE ISLAND GA 31328

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: WALTER T CLARK JR**MANAGING MEMBER****04/25/2014**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date