## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000001655

Entity Name: COKA, L.L.C.

**Current Principal Place of Business:** 

1247 CHESHIRE STREET PORT CHARLOTTE. FL 33953

**Current Mailing Address:** 

1247 CHESHIRE STREET PORT CHARLOTTE. FL 33953

FEI Number: 45-3910435 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COFFEY, JOHN B 2357 TAMIAMI TRAIL S VENICE, FL 34293 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** May 01, 2015

**Secretary of State** 

CC3688086472

Authorized Person(s) Detail:

Title MGRM

COFFEY, JOHN B Name Address 2357 TAMIAMI TRAIL S

VENICE FL 34293 City-State-Zip:

Title **MGRM** 

KAISER, WALTER G Name

Address 1247 CHESHIRE ROAD

PORT CHARLOTTE FL 33953 City-State-Zip:

that my name appears above, or on an attachment with all other like empowered.

Title MGR

**BROTHERS. GERALD** Name

5 MARION RD Address

City-State-Zip: COVENTRY RI 02816

Title

Title

Name

Address

Name

Address

City-State-Zip:

City-State-Zip:

**MGRM** 

**MGRM** 

COFFEY, KAREN L

VENICE FL 34293

KAISER, IRENE M

1247 CHESHIRE ROAD

PORT CHARLOTTE FL 33953

2357 TAMIAMI TRAIL S

05/01/2015 SIGNATURE: IRENE M KAISER **MGRM** 

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