

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000114173

Entity Name: TAPKAP, LLC

Current Principal Place of Business:

119 NORTH PALAFOX STREET
PENSACOLA, FL 32502

Current Mailing Address:

PO BOX 670
PENSACOLA, FL 32591 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HIGHTOWER, DAVID E
HIGHTOWER LAW FIRM
119 NORTH PALAFOX STREET
PENSACOLA, FL 32502 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
Name HIGHTOWER, DAVID E
Address PO BOX 670
City-State-Zip: PENSACOLA FL 32591

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: DAVID E HIGHTOWER

MANAGER

03/24/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date