

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000022549

Entity Name: TREASURE COAST RECOVERY, LLC

Current Principal Place of Business:

770 SE INDIAN STREET
STUART, FL 34997

Current Mailing Address:

770 SE INDIAN STREET
STUART, FL 34997 US

FEI Number: 45-4554397

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAYNE, JOSHUA A
740 SE INDIAN STREET
STUART, FL 34997 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 TREASURE COAST MANAGEMENT COMPANY, LLC
Address 770 SE INDIAN STREET
City-State-Zip: STUART FL 34997

Title CEO
Name VELAZQUEZ, RAY
Address 770 SE INDIAN STREET
City-State-Zip: STUART FL 34997

Title PRESIDENT
Name ALBAN, DAVID M
Address 770 SE INDIAN STREET
City-State-Zip: STUART FL 34997

Title CFO
Name KAMPS, PAUL
Address 770 SE INDIAN STREET
City-State-Zip: STUART FL 34997

Title CONTROLLER
Name COSTELLO, FRANCINE
Address 770 SE INDIAN STREET
City-State-Zip: STUART FL 34997

Title VP
Name DEERING, BRYAN T JR.
Address 770 SE INDIAN STREET
City-State-Zip: STUART FL 34997

Title COO
Name ROUSSEAU, EDWARD
Address 770 SE INDIAN STREET
City-State-Zip: STUART FL 34997

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: JOSHUA A. PAYNE

CORPORATE COUNSEL

06/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date