

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000047549

Entity Name: CRUM FAMILY TRUST "LLC."**Current Principal Place of Business:**7209 MARSH TER
PORT ST LUCIE, FL 34986**Current Mailing Address:**7209 MARSH TER
PORT ST LUCIE, FL 34986 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT
SUITE A
TAMPA, FL 33612 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	CRUM, PAUL
Address	7209 MARSH TER
City-State-Zip:	PORT ST LUCIE FL 34986

Title	MGRM
Name	CRUM, DORIS A
Address	7209 MARSH TER
City-State-Zip:	PORT ST LUCIE FL 34986

Title	S
Name	CRUM, DORIS A
Address	7209 MARSH TER
City-State-Zip:	PORT ST LUCIE FL 34986

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: PAUL CRUM**OWNER****01/17/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date