

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000113608

Entity Name: TROPICAL GENERATOR LLC

Current Principal Place of Business:

5701 COUNTRY LAKES DR
SUITE 17
FORT MYERS, FL 33905

Current Mailing Address:

PO BOX 2303
MADISON, AL 35758 US

FEI Number: 46-0886932

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREAVES, GREGORY
5701 COUNTRY LAKES DR
SUITE 17
FORT MYERS, FL 33905 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 PRESIDENT
Name GREAVES, GREGORY
Address 5701 COUNTRY LAKES DR
 SUITE 17
City-State-Zip: FORT MYERS FL 33905

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: GREGORY GREAVES

PRESIDENT

06/08/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date