## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000075189

Entity Name: DAVID SAPP LLC

### **Current Principal Place of Business:**

272 FRIENDSHIP CHURCH RD CRAWFORDVILLE, FL 32327

## **Current Mailing Address:**

272 FRIENDSHIP CHURCH RD CRAWFORDVILLE. FL 32327

## FEI Number: 20-5579826

# Name and Address of Current Registered Agent:

SAPP, DAVID 272 FRIENDSHIP CHURCH RD CRAWFORDVILLE, FL 32327 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

## Authorized Person(s) Detail :

| Title           | MGRM                     | Title           | MGRM                     |
|-----------------|--------------------------|-----------------|--------------------------|
| Name            | SAPP, DAVID              | Name            | SAPP, LEONARD R          |
| Address         | 272 FRIENDSHIP CHURCH RD | Address         | 272 FRIENDSHIP CHURCH RD |
| City-State-Zip: | CRAWFORDVILLE FL 32327   | City-State-Zip: | CRAWFORDVILLE FL 32327   |

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 SAPP  | OWNER | 03/15/2019 |
|-----------|---|-------|------------|
|           | Electronic Signature of Signing Authorized Person(s) Detail |       | Date       |

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 15, 2019 Secretary of State 2347369161CC

Date

Certificate of Status Desired: No