

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000124531

**Entity Name:** WALTER COCHRAN LLC

**Current Principal Place of Business:**

2900 NORTH ATLANTIC AVE  
UNIT 1006  
DAYTONA BEACH, FL 32118

**Current Mailing Address:**

17 ARCHER CT  
NEWNAN, GA 30265 US

**FEI Number:** 46-3578599

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INCorp SERVICES, INC  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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 COCHRAN, WALTER  
Address 2900 NORTH ATLANTIC AVE. # 1006  
City-State-Zip: DAYTONA BEACH FL 32118

*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:** WALTER R COCHRAN

**PRESIDENT**

**04/26/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date