

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000088076

**Entity Name:** WACISSA SPRINGS CANOE & KAYAK RENTAL, LLC

**Current Principal Place of Business:**

433 WACISSA SPRINGS ROAD  
WACISSA, FL 32361

**Current Mailing Address:**

P. O. BOX 335  
WACISSA, FL 32361

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SMITH, MICHAEL R  
433 WACISSA SPRINGS ROAD  
WACISSA, FL 32361 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 SMITH, MICHAEL R  
Address 433 WACISSA SPRINGS ROAD  
City-State-Zip: WACISSA FL 32361

*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:** MICHAEL R SMITH

MGRM

02/19/2018

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

\_\_\_\_\_  
Date