

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000108672

Entity Name: EAST COAST AGGREGATES, LLC

Current Principal Place of Business:

358 MERRYFIELD LANE
HASTINGS, FL 32145

Current Mailing Address:

P.O.BOX 1029
HASTINGS, FL 32145 US

FEI Number: 27-0185664

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAVENSCROFT, ASHLEY
358 MERRYFIELD LN.
HASTINGS, FL 32145 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: ASHLEY RAVENSCROFT

04/27/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name MOUKHTARA, MICHEL
Address 1035 SE LAKE LN.
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title AMBR
Name SALAFRIO, CARL
Address 6305 NW 79TH TR.
City-State-Zip: GAINESVILLE FL 32653

Title AMBR
Name VON HAHMANN, MARC
Address 105 PALM TRAIL
City-State-Zip: EAST PALATKA FL 32131

Title AMBR
Name WILLIAMS, KIMBERLY
Address 305 ROYAL CARIBBEAN CT.
City-State-Zip: ST. AUGUSTINE FL 32080

Title AMBR
Name ECA PARTNERS, LLC
Address 501 ST. JOHNS AVENUE
City-State-Zip: PALATKA FL 32177

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: ASHLEY RAVENSCROFT

REGISTERED AGENT

04/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date