

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000113030

**Entity Name:** D.SHARPE TRUCKING LLC

**Current Principal Place of Business:**

43 HEMLOCK TERRACE  
OCALA, FL 34472

**Current Mailing Address:**

43 HEMLOCK TERRACE  
OCALA, FL 34472

**FEI Number:** 47-1368714

**Certificate of Status Desired:** No

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

SHARPE, DAVID P MR  
43 HEMLOCK TERRACE  
OCALA, FL 34472 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	MGR	Title	MGR
Name	SHARPE, DAVID P MR	Name	SHARPE, CINDY
Address	43 HEMLOCK TERRACE	Address	43 HEMLOCK TERRACE
City-State-Zip:	OCALA FL 34472	City-State-Zip:	OCALA FL 34472

*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 P. SHARPE

**OWNER**

**03/27/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date