

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000105683

**Entity Name:** CITY TAP HOUSE WPB, LLC

**Current Principal Place of Business:**

1100 E HECTOR STREET STE 225  
CONSHOHOCKEN, PA 19428

**Current Mailing Address:**

1100 E HECTOR STREET STE 225  
CONSHOHOCKEN, PA 19428

**FEI Number:** 47-4398398

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** LARRY CATE

06/28/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LARSEN, JEFFREY R  
Address 353 WEST LANCASTER AVE STE 300  
City-State-Zip: WAYNE PA 19087

Title MGR  
Name MACCOLL, TIMOTHY B  
Address 353 WEST LANCASTER AVE STE 300  
City-State-Zip: WAYNE PA 19087

Title MGR  
Name COCO, CHRIS  
Address 1100 E HECTOR STREET STE 225  
City-State-Zip: CONSHOHOCKEN PA 19428

*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:** CHRIS COCO

MANAGER

06/28/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date