

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000177297

Entity Name: CORCHIS HOSPITALITY, LLC**Current Principal Place of Business:**36 N. FOUNDERS LANE
WATERSOUND, FL 32461**Current Mailing Address:**36 N. FOUNDERS LANE
WATERSOUND, FL 32461 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT
SUITE A
TAMPA, FL 33612 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	AMBR
Name	CORCHIS, GILLIAN K
Address	36 N. FOUNDERS LANE
City-State-Zip:	WATERSOUND FL 32461

Title	AMBR
Name	CORCHIS, ALYSSA K
Address	36 N. FOUNDERS LANE
City-State-Zip:	WATERSOUND FL 32461

Title	AMBR
Name	CORCHIS, NATHAN M
Address	36 N. FOUNDERS LANE
City-State-Zip:	WATERSOUND FL 32461

Title	AMBR
Name	CORCHIS, JORDIN P
Address	36 N. FOUNDERS LANE
City-State-Zip:	WATERSOUND FL 32461

Title	AMBR
Name	CORCHIS, AMY K
Address	36 N. FOUNDERS LANE
City-State-Zip:	WATERSOUND FL 32461

Title	AMBR
Name	CORCHIS, JR., GEORGE, P
Address	36 N. FOUNDERS LANE
City-State-Zip:	WATERSOUND FL 32461

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: GILLIAN KATHLEEN CORCHIS

AMBR

05/18/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date