

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000204036

Entity Name: KATHLEEN A. SMITH, LLC

Current Principal Place of Business:

209 HARRISON STREET
TITUSVILLE, FL 32780

Current Mailing Address:

PO BOX 2646
TITUSVILLE, FL 32781 US

FEI Number: 81-0815401

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SMITH, KATHLEEN A
209 HARRISON STREET
TITUSVILLE, FL 32780 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: KATHLEEN A. SMITH

04/19/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name SMITH, KATHLEEN A
Address 209 HARRISON STREET
City-State-Zip: TITUSVILLE FL 32780

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: KATHLEEN A. SMITH

OWNER

04/19/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date