

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000051569

**Entity Name:** WRIGHT WAY CONSTRUCTION MANAGEMENT, LLC.

**Current Principal Place of Business:**

3500 N. STATE RD 7  
300-8  
LAUDERDALE LAKES, FL 33319

**Current Mailing Address:**

3500 N STATE ROAD 7  
300-8  
LAUDERDALE LAKES, FL 33319 US

**FEI Number:** 81-1562210

**Certificate of Status Desired:** No

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

WRIGHT, CHRISTINA M  
1920 NW 80TH AVE  
MARGATE, FL 33063 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 AUTHORIZED MEMBER, MANAGER  
Name WRIGHT, KAREY  
Address 3500 N. STATE RD 7  
300-8  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title AUTHORIZED MEMBER,  
COMPTROLLER  
Name WRIGHT, KIMBERLEY  
Address 3500 N. STATE RD 7  
300-8  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title AUTHORIZED MEMBER  
Name WRIGHT, CHRISTINA  
Address 3500 N. STATE RD 7  
300-8  
City-State-Zip: LAUDERDALE LAKES FL 33319

*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:** KAREY WRIGHT

**MANAGING MEMBER**

**06/30/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date