

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000164092

**Entity Name:** THE REPORTING FIRM, LLC

**Current Principal Place of Business:**

1115 EAST CASS STREET  
TAMPA, FL 33602

**Current Mailing Address:**

1115 EAST CASS STREET  
TAMPA, FL 33602 US

**FEI Number:** 81-3755892

**Certificate of Status Desired:** No

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

PRIESTLEY, NIKA  
1115 EAST CASS STREET  
TAMPA, FL 33602 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 PRIESTLEY, NIKA  
Address 1115 EAST CASS STREET  
City-State-Zip: TAMPA FL 33602

Title AMBR  
Name CANNELLA, LYNN S  
Address 1115 EAST CASS STREET  
City-State-Zip: TAMPA FL 33602

Title AMBR  
Name HERRERA, GINA M  
Address 1115 EAST CASS STREET  
City-State-Zip: TAMPA FL 33602

*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:** GINA HERRERA

**MANAGING MEMBER**

**02/12/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date