

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000051940

**Entity Name:** ADVANCED FACILITY CONTRACTING & CONSULTING LLC

**Current Principal Place of Business:**

2055 MUSTANG COURT  
SAINT CLOUD, FL 34771

**Current Mailing Address:**

2055 MUSTANG COURT  
SAINT CLOUD, FL 34771

**FEI Number: 82-1852335**

**Certificate of Status Desired: Yes**

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

THOMPSON, ROBERT L  
2055 MUSTANG COURT  
KISSIMMEE, FL 34771 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           | AP                 | Title           | SECRETARY            |
| Name            | THOMPSON, ROBERT L | Name            | THOMPSON , BRENDA E  |
| Address         | 2055 MUSTANG COURT | Address         | 2055 MUSTANG COURT   |
| City-State-Zip: | KISSIMMEE FL 34771 | City-State-Zip: | SAINT CLOUD FL 34771 |

*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: BRENDA E THOMPSON**

**SECRETARY**

**02/03/2021**

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

\_\_\_\_\_  
Date