## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000091945

Entity Name: NANCE CUSTOM WORX LLC

**Current Principal Place of Business:** 

4600 WILKERSON BLUFF RD

HOLT, FL 32564

**Current Mailing Address:** 

PO BOX 312

HOLT. FL 32564 US

FEI Number: 95-4896603 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NANCE, RAYMOND 4600 WILKERSON BLUFF RD HOLT, FL 32564 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:

Name

Electronic Signature of Registered Agent

Date

FILED Apr 25, 2019

**Secretary of State** 

8853772512CC

Authorized Person(s) Detail:

Title MANAGER

NANCE, RAYMOND E Name NANCE, MARY E

Title

VP, ADMIN

Address PO BOX 312 Address PO BOX 312

City-State-Zip: HOLT FL 32564 City-State-Zip: HOLT FL 32564

Title PROJECT MANAGER
Name NANCE, PHILLIP W

Address PO BOX 312 City-State-Zip: HOLT FL 32564

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: MARY E NANCE

Electronic Signature of Signing Authorized Person(s) Detail

VΡ

04/25/2019