

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000108320

**Entity Name:** CAPTAIN'S TAVERN LLC

**Current Principal Place of Business:**

8742 N MOBLEY RD  
ODESSA, FL 33556

**Current Mailing Address:**

8740-8742 N MOBLEY RD  
ODESSA, FL 33556 US

**FEI Number: 82-1589920**

**Certificate of Status Desired: No**

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

CHIARITO, CHRISTIN L  
17519 FLORAL ESTATE DR  
ODESSA, FL 33556 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 CHIARITO, ERIC  
Address 17519 FLORAL ESTATE DR  
City-State-Zip: ODESSA FL 33556

Title AMBR  
Name DRECKSHAGE, WILLIAM  
Address 639 N MAYO ST  
City-State-Zip: CRYSTAL BEACH FL 34681

Title AMBR  
Name CHIARITO, CHRISTIN LYNN  
Address 17519 FLORAL ESTATE DR  
City-State-Zip: ODESSA FL 33556

*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: CHRISTIN CHIARITO**

**AMBR**

**06/25/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date