

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000121557

**Entity Name:** ECBB FLORIDA, LLC

**Current Principal Place of Business:**

118 CARILLON MARKET STREET  
SUNRISE 401  
PANAMA CITY BEACH, FL 32413

**Current Mailing Address:**

220 HEATHSTONE CIRCLE  
FRANKLIN, TN 37069 US

**FEI Number:** 82-4963181

**Certificate of Status Desired:** No

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

MARTIN, LARRY L  
809 BALBOA AVENUE  
PANAMA CITY, FL 32401 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 BAKER, LEIGH A  
Address 220 HEATHSTONE CIRCLE  
City-State-Zip: FRANKLIN TN 37069

Title AMBR  
Name BAKER, JESSE B  
Address 220 HEATHSTONE CIRCLE  
City-State-Zip: FRANKLIN TN 37069

Title AMBR  
Name CLEVINGER, ERNEST A  
Address 567 MIDWAY CIRCLE  
City-State-Zip: BRENTWOOD TN 37027

Title AMBR  
Name CLEVINGER, ARJAREE  
Address 567 MIDWAY CIRCLE  
City-State-Zip: BRENTWOOD TN 37027

*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:** LEIGH ANNE BAKER

AMBR

03/23/2020

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

\_\_\_\_\_  
Date