## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000177795

Entity Name: POST CORNER RP, LLC

**Current Principal Place of Business:** 

19369 US HWY 19 N. APT. 401

CLEARWATER, FL 33764

## **Current Mailing Address:**

19369 US HWY 19 N. APT. 401 CLEARWATER, FL 33764 US

FEI Number: 47-1521172 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GEORGE G. PAPPAS, P.A. 1822 N. BELCHER ROAD, SUITE 200 CLEARWATER, FL 33765 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

FILED Jan 20, 2020

**Secretary of State** 

3535754677CC

## Authorized Person(s) Detail:

Title MGR

Name ALTIKATIS, MARIA Address 19369 US HWY 19 N.

APT. 401

City-State-Zip: CLEARWATER FL 33764

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: MARIA ALTIKATIS MGR

Electronic Signature of Signing Authorized Person(s) Detail

01/20/2020 Date