

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000259917

**Entity Name:** SOUTHWEST FLORIDA EMERGENCY MANAGEMENT, LLC

**Current Principal Place of Business:**

5870 N HIATUS RD STE 200  
TAMARAC, FL 33321

**Current Mailing Address:**

265 BROOKVIEW CENTRE WAY STE 400  
ATTN: LEGAL DEPT.  
KNOXVILLE, TN 37919 US

**FEI Number:** 59-1237521

**Certificate of Status Desired:** No

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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 MEMBER  
Name TEAM FINANCE LLC  
Address 265 BROOKVIEW CENTRE WAY STE  
400  
City-State-Zip: KNOXVILLE TN 37919

*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:** JOHN R. STAIR

ASSISTANT SECRETARY 04/08/2021

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

\_\_\_\_\_ Date