

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000004881

**FILED**  
**Jan 25, 2020**  
**Secretary of State**  
**4707623679CC**

**Entity Name:** 1200 CASS STREET ASSOCIATES, LLC

**Current Principal Place of Business:**

1716 W LEMON ST  
TAMPA, FL 33606-1031

**Current Mailing Address:**

1716 W LEMON ST  
TAMPA, FL 33606-1031 US

**FEI Number:** 59-2685965

**Certificate of Status Desired:** Yes

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

LOGAN, III, CLAUDE D  
1716 W LEMON ST  
TAMPA, FL 33606-1031 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	MGR	Title	MGR
Name	CLEWIS, LELIA L	Name	LOGAN, III, CLAUDE D
Address	1716 W LEMON ST	Address	1716 W LEMON ST
City-State-Zip:	TAMPA FL 33606-1031	City-State-Zip:	TAMPA FL 33606-1031

Title MGR  
 Name LOGAN, W. RAY  
 Address 1716 W LEMON ST  
 City-State-Zip: TAMPA FL 33606-1031

*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:** W. RAY LOGAN

**MANAGER**

**01/25/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date