

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000083044

**Entity Name:** BRICK CITY PARTNERS, LLC

**Current Principal Place of Business:**

621 SE 43RD AVE  
OCALA, FL 34471

**Current Mailing Address:**

621 SE 43RD AVE  
OCALA, FL 34471

**FEI Number:** 82-5073812

**Certificate of Status Desired:** No

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

CORUN, G. STEPHEN  
621 SE 43RD AVE  
OCALA, FL 34471 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 MGRM  
Name CORUN, G. STEPHEN  
Address 621 SE 43RD AVE  
City-State-Zip: OCALA FL 34471

Title MGRM  
Name LEFEBVRE, JIM A  
Address 3100 SW COLLEGE RD STE 316  
City-State-Zip: OCALA FL 34474

Title MGRM  
Name CLEMENS, LAURENCE W III  
Address 5 PEACN DRIVE RUN  
City-State-Zip: OCALA FL 34472

*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:** G. STEPHEN CORUN

**MEMBER**

**02/17/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date