

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000162858

**Entity Name:** THE TRAILER DR LLC

**Current Principal Place of Business:**

17811 70TH ST N  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

17811 70TH ST N  
LOXAHATCHEE, FL 33470 US

**FEI Number:** 83-2173232

**Certificate of Status Desired:** No

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

NELSON, MATTHEW D  
17811 70TH STREET N  
LOXAHATCHEE, FL 33470 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	Title	AMBR
Name	LIMA, DANIEL	Name	M NELSON ENTERPRISES INC
Address	17686 70TH STREET N	Address	17811 70TH ST N
City-State-Zip:	LOXAHATCHEE FL 33470	City-State-Zip:	LOXAHATCHEE FL 33470

*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:** MATTHEW NELSON

**REGISTERED AGENT**

**02/23/2019**

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

\_\_\_\_\_  
Date