

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000232201

**Entity Name:** ACW SERVICES LLC

**Current Principal Place of Business:**

367 E WILDMERE AVE  
LONGWOOD, FL 32750

**Current Mailing Address:**

367 E WILDMERE AVE  
LONGWOOD, FL 32750 US

**FEI Number:** 83-2135136

**Certificate of Status Desired:** No

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

AMBS, ANAJENESE  
367 E WILDMERE AVE  
LONGWOOD, FL 32750 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 AMBS, ANAJENESE  
Address 367 E WILDMERE AVE  
City-State-Zip: LONGWOOD FL 32750

*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:** ANAJENESE AMBS

MGRM

01/21/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date