

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000237813

Entity Name: A1A CONTRACTOR GROUP LLC**Current Principal Place of Business:**388 33RD AVE. S
JACKSONVILLE BEACH, FL 32250**Current Mailing Address:**388 33RD AVE. S
JACKSONVILLE BEACH, FL 32250 US**FEI Number:** 83-2228588**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.
5575 S. SEMORAN BLVD
SUITE 36
ORLANDO, FL 32822 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, AMBR | Title | MGR |
| Name | GODWARD, DAVID | Name | FAUNCE, CATHERINE |
| Address | 388 33RD AVE. S | Address | 388 33RD AVE. S |
| City-State-Zip: | JACKSONVILLE BEACH FL 32250 | City-State-Zip: | JACKSONVILLE BEACH FL 32250 |
| | | | |
| Title | MGR | | |
| Name | GARRISON, TINDEL | | |
| Address | 388 33RD AVE. S | | |
| City-State-Zip: | JACKSONVILLE BEACH FL 32250 | | |

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: DAVID GODWARD

MGR

01/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date