

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000262135

**Entity Name:** DEMARIA, DE KOZAN & WHITE, PLLC

**Current Principal Place of Business:**

510 E. ZARAGOZA STREET  
PENSACOLA, FL 32502

**Current Mailing Address:**

510 E. ZARAGOZA STREET  
PENSACOLA, FL 32502 US

**FEI Number: 83-2789208**

**Certificate of Status Desired: No**

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

WHITE, KATHLYN M  
510 E. ZARAGOZA STREET  
PENSACOLA, FL 32502 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 PARTNER  
Name WHITE, KATHLYN MONROE ESQ.  
Address 510 E. ZARAGOZA STREET  
City-State-Zip: PENSACOLA FL 32502

Title PARTNER  
Name DE KOZAN, BELINDA BARNES ESQ.  
Address 510 E. ZARAGOZA STREET  
City-State-Zip: PENSACOLA FL 32502

Title PARTNER  
Name DEMARIA, KATHLEEN KIES ESQ.  
Address 510 E. ZARAGOZA STREET  
City-State-Zip: PENSACOLA FL 32502

*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: KATHLEEN K. DEMARIA**

**PARTNER**

**03/11/2020**

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

\_\_\_\_\_  
Date