

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000064279

**Entity Name:** DETRICK CONSULTING LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

1609 N RIVERSIDE  
501  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

1609 N RIVERSIDE  
501  
POMPANO BEACH, FL 33062

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

DETRICK, DAVID  
1609 N RIVERSIDE DR  
501  
POMPANO BEACH, FL 33062 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  
Name DETRICK, DAVID  
Address 1609 N RIVERSIDE DR 501  
City-State-Zip: POMPANO BEACH FL 33062

*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 DETRICK

**PRESIDENT**

**07/18/2020**

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

\_\_\_\_\_  
Date