

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000074219

**Entity Name:** ECKENRODE CONSULTING LLC.

**Current Principal Place of Business:**

1430 SE 34TH ST.  
CAPE CORAL, FL 33904

**Current Mailing Address:**

1430 SE 34TH ST.  
CAPE CORAL, FL 33904

**FEI Number:** 28-4172859

**Certificate of Status Desired:** No

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

ECKENRODE, CHARLES R  
1430 SE 34TH ST.  
CAPE CORAL, FL 33903 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 ECKENRODE, CHARLES R  
Address 1430 SE 34TH ST.  
City-State-Zip: CAPE CORAL FL 33904

Title AMBR  
Name SCHALL, KIMBERLY A  
Address 1430 SE 34TH ST.  
City-State-Zip: CAPE CORAL FL 33904

Title AMBR  
Name REHNER, CARRIE S  
Address 11251 AZALEA LN.  
City-State-Zip: FORT MYERS BEACH FL 33931

*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:** CHARLES R. ECKENRODE

MANAGER

06/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date