

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000098601

Entity Name: SHORE COLLISION, LLC

Current Principal Place of Business:

929 12TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

929 12TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250

FEI Number: 85-0644981

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHORE, LEWIS F
929 12TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250 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 AP
Name SHORE, LEWIS F
Address 1151 4TH AVENUE NORTH
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: LEWIS FAY SHORE

**ADMINISTRATIVE
PRESIDENT**

03/14/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date