

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000005627

**Entity Name:** RED CLASSIC EQUIPMENT, LLC

**Current Principal Place of Business:**

4115 COCA-COLA PLAZA  
CHARLOTTE, NC 28211

**Current Mailing Address:**

PO BOX 31487  
CHARLOTTE, NC 28231

**FEI Number: 27-4004980**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            PRESIDENT  
Name            GLANCY, DAVID M  
Address        1800 CONTINENTAL BLVD  
                  SUITE 400  
City-State-Zip: CHARLOTTE NC 28273

Title            DIR  
Name            KATZ, DAVID M  
Address        4100 COCA-COLA PLAZA  
City-State-Zip: CHARLOTTE NC 28211

Title            VP  
Name            BILLIARD, WILLIAM J  
Address        4100 COCA-COLA PLAZA  
City-State-Zip: CHARLOTTE NC 28211

Title            VPS  
Name            FISHER, E BEAUREGARDE III  
Address        4100 COCA-COLA PLAZA  
City-State-Zip: CHARLOTTE NC 28211

*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: WILLIAM J BILLIARD**

**VP**

**04/09/2019**

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

\_\_\_\_\_  
Date