

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000117850

**Entity Name:** XS REVIVAL PARTS, LLC

**Current Principal Place of Business:**

1700 SOUTH MACDILL AVENUE, STE 340  
TAMPA, FL 33629

**Current Mailing Address:**

1700 SOUTH MACDILL AVENUE, STE 340  
TAMPA, FL 33629

**FEI Number:** 47-4518799

**Certificate of Status Desired:** No

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

MCKERNAN, PETER B II  
1700 SOUTH MACDILL AVENUE, STE 200  
TAMPA, FL 33629 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           MANAGER  
Name           SMITH, THAYER C. JR.  
Address        1700 SOUTH MACDILL AVENUE, STE  
                  340  
City-State-Zip: TAMPA FL 33629

Title           CFO  
Name           AZZARELLI, THOMAS T.  
Address        1700 SOUTH MACDILL AVENUE, STE  
                  340  
City-State-Zip: TAMPA FL 33629

Title           COO  
Name           WHITE, RUSSELL  
Address        1700 SOUTH MACDILL AVENUE, STE  
                  340  
City-State-Zip: TAMPA FL 33629

*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:** THAYER C SMITH

**MANAGER**

**03/14/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date