

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000008927

**Entity Name:** VESTCOR PARTNERS XXV, LLC

**Current Principal Place of Business:**

3030 HARTLEY ROAD  
SUITE 310  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

3030 HARTLEY ROAD  
SUITE 310  
JACKSONVILLE, FL 32257 US

**FEI Number:** 59-3660038

**Certificate of Status Desired:** No

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

VESTCOR, INC.  
3030 HARTLEY ROAD  
SUITE 310  
JACKSONVILLE, FL 32257 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:** JOHN D. ROOD

04/27/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title VP  
Name FRICK, STEPHEN A  
Address 3030 HARTLEY ROAD  
SUITE 310  
City-State-Zip: JACKSONVILLE FL 32257

Title VST  
Name MORGAN, WILLIAM L  
Address 3030 HARTLEY ROAD  
SUITE 310  
City-State-Zip: JACKSONVILLE FL 32257

Title VP  
Name MOORE, CLARENCE S  
Address 3030 HARTLEY ROAD  
SUITE 310  
City-State-Zip: JACKSONVILLE FL 32257

Title VP  
Name FLOYD, JASON O.  
Address 3030 HARTLEY ROAD  
SUITE 310  
City-State-Zip: JACKSONVILLE FL 32257

*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:** CLARENCE S. MOORE

VP

04/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date