

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021327

Entity Name: FISHER DEVELOPMENT LLC**Current Principal Place of Business:**1500 LEWIS TURNER BLVD.
FT. WALTON BEACH, FL 32547**Current Mailing Address:**1500 LEWIS TURNER BLVD.
FT. WALTON BEACH, FL 32547 US**FEI Number:** 52-2376128**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FISHER, ROBERT A
1500 LEWIS TURNER BLVD.
FT. WALTON BEACH, FL 32547 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	MGRM
Name	FISHER, ROBERT A
Address	1500 LEWIS TURNER BLVD.
City-State-Zip:	FT. WALTON BEACH FL 32547

Title	MEMB
Name	FISHER, MARY E
Address	1500 LEWIS TURNER BLVD.
City-State-Zip:	FT. WALTON BEACH FL 32547

Title	MEMBER
Name	FISHER , ROBERT W
Address	716 BRADFORD DRIVE
City-State-Zip:	FT. WALTON BEACH FL 32547

Title	MEMBER
Name	FRIEDAUER, KARI F
Address	1554 HEATHERWAE LOOP
City-State-Zip:	POWELL OH 43065

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: ROBERT A. FISHER**MANAGING MEMBER****02/11/2019**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date