

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031860

Entity Name: WCSJR 982B, LLC

Current Principal Place of Business:

244 SAUGATUCK AVENUE
WESTPORT, CT 06880

Current Mailing Address:

P.O. BOX 2630
WESTPORT, CT 06880

FEI Number: 20-1065032

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLY, CHARLES MJR
2390 TAMIAMI TRAIL NORTH, SUITE 204
NAPLES, FL 34103 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 MGR
Name DAVIS, ELWOOD B
Address P.O. BOX 2630
City-State-Zip: WESTPORT CT 06880

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: ELWOOD DAVIS

MANAGER

01/09/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date