

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000033612

Entity Name: JOHN C. WELLS, LLC**Current Principal Place of Business:**401 ZOO PARKWAY
JACKSONVILLE, FL 32226**Current Mailing Address:**PO BOX 331780
ATLANTIC BEACH, FL 32233 US**FEI Number:** 27-0112579**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WELLS, JOHN C
401 ZOO PARKWAY
JACKSONVILLE, FL 32226 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	WELLS, JOHN C
Address	401 ZOO PARKWAY
City-State-Zip:	JACKSONVILLE FL 32226

Title	VP
Name	WELLS, MAGHEN
Address	401 ZOO PARKWAY
City-State-Zip:	JACKSONVILLE FL 32226

Title	VP
Name	WELLS, JACK C
Address	401 ZOO PARKWAY
City-State-Zip:	JACKSONVILLE FL 32226

Title	MANAGER
Name	WELLS, CHARLES
Address	401 ZOO PARKWAY
City-State-Zip:	JACKSONVILLE FL 32226

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: MAGHEN WELLS STERN

VP

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date