

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000036132

**Entity Name:** SELPH'S MOBILE HOME VILLAGE LLC

**Current Principal Place of Business:**

297 1/2 SOUTH LAKE AVENUE  
FOSTPROOF, FL 33843

**Current Mailing Address:**

P.O. BOX 532  
FROSTPROOF, FL 33843

**FEI Number:** 42-1632497

**Certificate of Status Desired:** No

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

BALLARD, VERA ELIZABETH  
2007 N. LAKE REEDY BLVD.  
FROSTPROOF, FL 33843 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 BALLARD, VERA ELIZABETH  
Address P.O. BOX 532  
City-State-Zip: FROSTPROOF FL 33843

*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:** VERA ELIZABETH BALLARD

MGR

01/09/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date