

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000054364

**Entity Name:** FAULKNER PRESS LLC

**Current Principal Place of Business:**

623 SW 27TH ST  
GAINESVILLE, FL 32607

**Current Mailing Address:**

3324 W UNIVERSITY AVE  
PO BOX 352  
GAINESVILLE, FL 32607 US

**FEI Number:** 20-1394194

**Certificate of Status Desired:** No

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

DUNGAN, KEITH R  
623 SW 27TH ST  
GAINESVILLE, FL 32607 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:** KEITH R. DUNGAN

01/14/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name DUNGAN, KEITH R  
Address 204 WEST UNIVERSITY AVE.  
City-State-Zip: GAINESVILLE FL 32601

*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:** KEITH R DUNGAN

MGRM

01/14/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date