## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056622

Entity Name: BEN SPIKER, LLC

**Current Principal Place of Business:** 

902 9TH AVE N

JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:** 

902 9TH AVE N

JACKSONVILLE BEACH, FL 32250 US

FEI Number: 68-0558532 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIKER, BEN 902 9TH AVE N JACKSONVILLE BEACH, FL 32250 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

Date

**FILED** Jan 22, 2013

**Secretary of State** 

CC9974949295

## Authorized Person(s) Detail:

Title MGRM

Name SPIKER, BEN J Address 902 9TH AVE N

JACKSONVILLE BEACH FL 32250 City-State-Zip:

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

01/22/2013 SIGNATURE: BEN SPIKER **MGRM**