## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069447

Entity Name: LINDSAY JOMAR MANAGEMENT CO., LIMITED LIABILITY

**COMPANY** 

Apr 24, 2018 Secretary of State CC8353133562

**FILED** 

## **Current Principal Place of Business:**

**6 MANGROVE POINT** 

ST. PETERSBURG, FL 33706

## **Current Mailing Address:**

**6 MANGROVE POINT** 

ST. PETERSBURG, FL 33706

FEI Number: 38-3709911 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GALBRAITH STATUTORY AGENT, LLC 9045 STRADA STELL CT.#400 NAPLES, FL 34109 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: BRAD A. GALBRAITH 04/24/2018

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGRM Title MGRM

NameLINDSAY, JOHNNameLINDSAY, MARTHA AAddress6 MANGROVE POINTAddress6 MANGROVE POINT

City-State-Zip: ST. PETERSBURG FL 33706 City-State-Zip: ST. PETERSBURG FL 33706

Title MGRM Title MGRM

NameWILLIAMS, KATHRYN ENameKIDWELL, MARY LAddress8532 DEERPATHAddress6311 ASH STREET

City-State-Zip: WEST CHESTER OH 45069 City-State-Zip: PRARIE VILLAGE KS 66208

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: JOHN LINDSAY

04/24/2018