

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084439

Entity Name: WSI EQUITY, LLC

Current Principal Place of Business:

4609 REECE ROAD
PLANT CITY, FL 33566

Current Mailing Address:

P.O. BOX 3749
PLANT CITY, FL 33563 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEWIS, SAMANTHA D
4609 REECE ROAD
PLANT CITY, FL 33566 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 MGRM
Name DEAMBROSE, SHERWOOD J
Address P.O. BOX 3749
City-State-Zip: PLANT CITY FL 33563

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: SHERWOOD J DEAMBROSE

MGRM

04/28/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date